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**Blackness in a predominantly white academe: a case of the University of Cape Town's  
Faculty of Health Sciences**

**by**

**ABRAHAM CHUPE SEROTE**

**Thesis was presented for the degree of:**

**DOCTOR OF PHILOSOPHY**

**In the Department of Sociology  
Graduate School of Humanities**

**University of Cape Town**

**Supervisors:**

**Associate Professor David M Cooper, Sociology  
Professor Leslie London, Public Health & Family Medicine**

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This thesis was presented in fulfilment of the requirements for the degree of Doctor of Philosophy (PhD) in the Department of Sociology, Faculty of Humanities, University of Cape Town. The work on which this thesis is based is original research and has not, in whole or in part, been submitted for another degree at this or any other university. The university is empowered to reproduce all or part of the contents for the purposes of research.

Abraham Chupe Serote, July 2011

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## ABSTRACT

This study examined the lived experience of black registrars (medical residents) in a predominantly white academic medical milieu using the single case of the University of Cape Town Faculty of Health Sciences in South Africa. It foregrounded this experience by demonstrating how it is circumscribed by notions of race (and racism). Given the centrality of race and consequently, whiteness, a select few members of the white academic staff were included in the study as a ‘control’ group.

In order to decipher this black experience and how whites in turn contended with race, the study employed Critical Race Theory (CRT) as its overarching theoretical lens. Just as CRT received theoretical and conceptual traction in the United States in the light of the post-civil rights struggles, in the context of this study, the post-apartheid racial discourse in South Africa too necessitated employment of CRT in examining the efficacy of the so-called non-racialism, often (mis)construed to mean ‘colour-blindness’. In employing CRT as the key theoretical lens, this study paid particular attention to the four basic tenets of CRT, namely, (a) the centrality of race and racism in post-apartheid South Africa; (b) interest convergence / material determinism; (c) social constructionism and; (d) the black voice thesis.

In this research, case study research design was preferred together with qualitative research data method. Therefore, in-depth interviews were conducted with 20 black registrars as well as with 5 senior academic staff at the University of Cape Town Faculty of Health Sciences (UCT FHS). In that regard, the study was a single case inquiry. The in-depth interviews conducted, which I prefer to refer to as ‘conversations’, enabled me to immerse myself into the lives of these registrars as well as afforded me the opportunity to understand the social machination of the white psyche and its propensity to the ‘colour-blind’ racial frames, anchored primarily through ‘abstract liberalist’ worldviews and the general minimisation of racism.

While this research confirmed CRT theoretical underpinnings that life experience in race-centred societies is, to a great extent, circumscribed by race (and racism), it also contended, nonetheless, that there existed no singular black experience; hence the emergence of the three narratives of black registrar experience at UCT FHS. The first narrative concerned those registrars who registered the highest level of disenchantment with UCT FHS and articulated this in terms of their blackness. The second narrative, although equally disenchanted with

UCT FHS, nonetheless resisted the white hegemony at this institution. In effect, they saw themselves as change agents. The third narrative, in stark contrast to the first and second narratives, represented a small cadre of black registrars that were 'colour-blind' and thus have had no experience that could be articulated in racial terms, nor have they personally observed, experienced, nor contended with racist practices at UCT FHS. Closely related to the third narrative is the experience of white academic staff that was almost 'blind' to the black disenchantment foregrounded by the first and second registrar narratives.

The study recommends, among others, that UCT FHS embarks on a concerted recruitment drive of black registrars and black academic medical staff so as to build a critical mass of blacks at the institution. It also suggests that black talent must be identified early in the MB ChB class and nurtured along to increase potential pool of registrar candidates. Of the most radical recommendations is that the institution needs to do away with so-called EE posts / development posts to deal with the problem of 'perpetual academic development' of blacks. A Faculty Ombudsperson is also suggested to deal with frailties in the institutional climate owing to the anathema of race (and racism).

## DEDICATION

A special mention is due to my late uncle (Ramogolo) Bishop SE Serote, by whom I was reared from the tender age of twelve until I very successfully completed high school. He saw to all my schooling and other personal needs in the place of my parents. It was he who always urged me to look beyond the ordinary: to set higher goals. This moral colossus has been, to me, a parent, a friend, a teacher, and a spiritual guide. He has been my greatest source of strength and inspiration. To you, *Mokwana*, I say: *Although you may not be here with us in body, however, in spirit we always feel your omnipresence. We know that you too are relishing this moment just as we are.* To Mamogolo Angie, I had looked forward to walking with you these last miles of the PhD, unfortunately, you were taken away from us at the time we least expected. However, I have this sense of comfort that you too are with us in spirit and no doubt you are relishing this moment with the rest of our family. May your soul rest in eternal peace.

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## CHAPTER ONE

### Introduction

#### 1.1 Introduction

My association with the University of Cape Town goes back over sixteen years. It was at this University that I received my initial undergraduate training in the then Faculty of Social Sciences & Humanities, with 1993 as my first year of registration. It was only upon graduation that I embarked on my first ‘real world’ assignment in the Department of Student Housing as an administrative intern.<sup>1</sup> My work involved being a liaison person between the management of Student Housing Department and residence students, particularly the leadership structures<sup>2</sup> within student residences, on any matter of concern about the quality of their residence life in the different dormitories. I also took on *ad hoc* assignments as and when these came to my desk.

Understanding very well the purpose of the internship program (that is, to amass enough working experience so as to be competitive in the internal university job market) I approached the then Director of Human Resources, a stoic white woman, probably in her late forties at the time. I was surprised, in fact humbled, at how she quickly warmed to my youthful overtures. I made it plain that I had spent almost a year with Student Housing and, having seen that better prospects were few and far between, I needed another experience in this last leg of my internship programme and therefore a short stint in human resources would do me no harm. Her response was in the affirmative. It was in this department that I was to spend the next seven years of my adult working life at the University. It was through my involvement with the Department of Human Resources that I gained more insight into the University’s employment practices. Of particular interest to me was the usual jockeying when it came to academic appointments, *ad hominem* promotions, and salary augmentations.<sup>3</sup> My roles as Recruitment Officer and, later, as a Human Resources Generalist, introduced me to

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<sup>1</sup> Administrative internship postings were part of the University’s greater strategy of transforming its mainly white staff profile in the administrative sector. There was a particular attention given specifically to candidates of African descent, who, compared with ‘Coloureds’ were grossly underrepresented. The administrative internship carried a maximum contract period of eighteen months within which the intern would have garnered sufficient experience to compete for permanent administrative positions at the University.

<sup>2</sup> According to approved general rules of the University, each student residence must elect a body of representatives, usually up to ten, to look after the particular residence needs, with social and physical (infrastructural) needs consuming most of their budgets. Such an elected body of representatives is called a ‘House Committee’. Students elect a representative to serve them for a one-year term.

<sup>3</sup> It was a standard practice in some faculties, most notably in Engineering, to pay a select group of academics a top-up fee based on scarcity of skill and overall contribution to the life of the faculty – ‘salary augmentation’ was the precise nomenclature used for these top-up increases.



the intricate web constituting powerful personalities in Faculties and some informal networks across the University (some of which I could easily access while some were simply out of bounds).

On account of my natural instinct for social activism, my work in Human Resources, especially when it came to recruitment, inevitably brought me into serious conflict with members of selection committees to whom I was required to give 'expert' advice. This, of course, included the application of the employment equity policy of the university, thereby making sure that it formed part of the process from the very beginning of the recruitment and selection effort to the time when a candidate was finally recommended for appointment. In South Africa an affirmative action policy, as it is popularly referred to, is made provision for in law through the Employment Equity Act no.55 of 1998. This Act makes a particular provision for fair discrimination for the purpose of redressing the legacy of past employment injustices premised on race. Accordingly, universities, as employers, are bound by law to commit to an employment equity plan, with targets - the progress of which they must report on to the Department of Labour. While the Constitution of the Republic of South Africa outlaws unfair discrimination as unconstitutional, and therefore illegal, that selfsame constitution makes provision for fair discrimination for the purpose of redressing the wrongs of the past premised primarily on race. In other words, it is neither unconstitutional nor illegal to entrench employment policies and practices based on race for as long as this will further the stated objectives of employment equity, i.e. ensuring that the previously disadvantaged sections of South Africa's population are fairly represented as far as formal employment is concerned.

After I started my tenure with the University's Human Resources Department, I realised early on that there was a general sense of exasperation and weariness and, in some cases, even open hostility and resentment about the University's employment equity policy. The predominantly white selection committees which I serviced declared almost routinely that: 'We will employ anyone who meets our criteria. It does not matter whether they happen to be black, white, green or purple'. I was awestruck at how, in this battle, the very few black persons in the committees would recoil and keep their peace, not once ever airing a dissenting opinion. It seemed to me to be a case of their being present, while, in fact, absent. Even more troubling was that the level of seniority did not seem to matter when it came to black members of staff. It was here that I began to wrestle with the race question, in particular, the

staying power of whiteness and what seemed to be a corresponding black acquiescence to its normalness. I wondered as to why academic and social mobility did not seem to extricate blacks from the periphery into the mainstream of the academy. How could a professor, an associate professor and a senior lecturer seem so displaced as though they were like me, an administrative ‘handyperson’ who, by design, should be an outsider to the real business of the academy?

It was however, through my work with the Black Staff Association<sup>4</sup> and the Black Caucus (see below for description) that I began to get more access into the texture of black life at this institution. I also joined the Black Staff Association to hear the black voice that was a rarity in formal academic meetings like Faculty boards, Faculty Executive Committees (sometimes referred to as the Dean’s Advisory Committees), etc. Later, it became apparent that there were some black people who had jitters about joining the Association as they were already holding memberships of other more recognised employee representative bodies, such as the National Education Health and Allied Workers Union (NEHAWU), the UCT Employees Union and the Academic Staff Association. Since the Black Staff Association could not be a recognised representative staff body (as it was not possible to reach the required membership thresholds, given the paucity of black numbers at the university) for black people needing a forum and a voice, but who, for all intents and purposes need to keep membership of their unions, an informal grouping of representatives from NEHAWU, the Academic Staff Association, UCT Employees Union, Black Staff Association, and Student Representative Council (SRC) agreed to the establishment of a Black Caucus – which, unlike the Black Staff Association would not be too tied to formal university rules regarding membership and attendant protocols. It would be an informal lobby group that would play a watchdog role in getting the University to account for its progress (or lack thereof) in ensuring that transformation occurs. In other words, the Black Caucus effort was a concrete attempt to remake the university as a home for all, including the non-traditional new entrants, for example, blacks, women, and people with disabilities.

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<sup>4</sup> Although currently almost dormant, it was expressly aimed at ‘developing additional resources to improve the employment, academic, social and psychological quality of life for the University’s black population’. As an association it aimed, inter alia, at uniting black staff in the University; to foster and cultivate social, cultural and intellectual relationships among black staff and students; to encourage, promote and support the recruitment of black staff members in all levels and departments; to encourage and support the recruitment of black students in all departments, particularly where black students are still underrepresented; and to encourage active participation of black alumni in the affairs of the University. Black staff included both members of the faculty, those in administrative and professional positions, as well as ordinary workers who did the menial work.

I need to mention, however, that my involvement with both the Association and later, the Caucus, was also about my trying to understand and deal with the rather ambivalent relationship that I had, hitherto, with the University. While I was grateful for the administrative internship opportunity was presented with in my youth and the subsequent challenge to work in the Human Resources Department, I was, nonetheless, disappointed as to how ineffectual I had become in the latter position, and how fast the ideal of giving ‘expert’ advice to a willing and receptive audience in the form of selection committees, and other important committees in the University, had quickly dissipated. In that regard, the Caucus was to afford me the opportunity to be in a company of persons that shared similar experiences and helped me deal with my apparent ‘failures’, borne out of my youthful and naive desire ‘to change the world’.

It would be naive for me to claim the status of a neutral disinterested observer in this research endeavour because I am not. I bring a particular perspective to the research process based on my experience at the University of Cape Town, and I have been very conscious of that ‘insider’ positionality throughout the research. This ‘insider’ positionality is, however, mitigated by my sample selection. I chose the University of Cape Town’s Faculty of Health Sciences<sup>5</sup> at which I have not studied and with which I have had no prior association. Thus, in a way, though I might be considered too close to the University for the purpose of this research, I am far from being close to my case study, that is, the University of Cape Town Medical School. However, being close need not in itself be an automatic disqualification. As the feminist critique of disengagement asserts, the idea that it is possible to separate the researcher from the object of their research is undesirable since, in any event, there would be a myriad of ways in which the researcher is affected by the context of the research or by the people who are part of it, (May, 1993:14). May counsels, therefore, that ‘the researcher should be aware of the ways in which their own biography is a fundamental part of the research process’ (1993:14).

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<sup>5</sup> As part of the internal transformation drive, the Faculty changed its name from the ‘Faculty of Medicine’ (sometimes referred to as the University of Cape Town Medical School) to the ‘Faculty of Health Sciences’ thereby deliberately circumventing the higher status traditionally accorded to medicine at the expense of other disciplines, usually termed ‘allied’ disciplines. The researcher will therefore make reference to the UCT Faculty of Health Sciences (UCT FHS) instead of the UCT Medical School, since this seems the most acceptable nomenclature of the new dispensation. However, where context dictate, the researcher may use either, i.e. UCT FHS or UCT Medical School.

The research employs apartheid racial delineations drawn from the old Populations Register Act, which prescribed a hierarchy of 'races' in the following order: White, Indian, Coloured, and Black (African). The use of this hierarchy is in no way intended to reify apartheid racial ordering. Rather, it is used as an acknowledgement that much of our social reality is racialised given our socio-historical past.

While in terms of the Critical Race Theory (CRT) literature coming out of the United States, the racial designation 'black' may be a default racial category for anything other than white i.e. 'non-white', for the purpose of this research, however, 'black' has a very specific and deliberate meaning. That is, it does not denote a racial category in a generic sense like in the United States. Rather, it signifies all those whom the successive white minority governments termed the 'Bantus' (and prior to that, the 'natives' (Western, 1981)).<sup>6</sup> In the current official racial nomenclature, however, the term 'African' or 'Black African' is preferred. In this study, however, 'black' is preferred as 'African' may also denote a form of group identity that is bounded in geographical terms (that is, there might be some argument that one qualifies as African because one was born and lives in Africa notwithstanding one's descent). Thus, black excludes Coloureds and Indians, who, in the generic application of the term would usually pass as blacks. This is a marked departure from the US understandings of blackness as primarily that which generally denotes non-whiteness. In other words, while in the context of the US and the literature on CRT, the black and white binary seems so immutable, in the South African context, the apartheid four-tier distilled 'non-whiteness' further by socially constructing middle-rung races (Coloureds and Indians) who, in apartheid thinking, although not superior to the white stock, were found to be more agreeable in the white social imagination than their 'Native/African/Bantu/Black' counterparts, whom the researcher chooses to simply designate as blacks.

'Indians' in South Africa refer to a racial category coming mainly out of persons of Indian descent whose forbearers came to South Africa in the late 19<sup>th</sup> century as merchants and indentured labourers. The latter were to toil in the sugar plantations of Natal, itself a British colony at the time. While a significant group in terms of contribution to the national output, given that most tended to be either entrepreneurs or work in elite occupational fields, they nonetheless constitute less than 2% of South Africa's population (Statistics South Africa,

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<sup>6</sup> See also Fisher (1969).

2001). On the other hand 'Coloureds' as a racial category are a polyglot of socio-linguistic cultural groups, some coming out of black and white miscegenation. As Fisher (1969) explained, they are not Bantu, nor white, or Asiatic but rather people of mixed descent, including, white European, black African, Khoi-San, Malay, Nama, and Griqua.

In this research the researcher elected to work with a sample of black registrars (as opposed to also sampling 'Coloured' and 'Indian' registrars) given that there is recognition that while all 'non-whites' have endured countless decades of white oppression under successive colonial and apartheid regimes, this oppression was not experienced uniformly by all oppressed groups depending on the place they occupied in the colonial and apartheid racial hierarchy. In this context, 'blacks'/'natives'/'Bantus'<sup>7</sup> occupied the lowest rung of the colonial and apartheid social order. Hence, there is a particular attention paid by the researcher to this specific group by virtue of its members being presumed to be the lowest of the low in the racial social stratum. This choice is in no way intended to dismiss the many commendable acts of heroics in the liberation struggle by 'Coloureds' and persons of Indian descent, and the unimaginable suffering they have had to endure at the hands of successive white totalitarian regimes.

## **1.2 Background to the Study**

This researcher has always harboured ambitions to pursue graduate studies at the highest level on a subject that interests me deeply. It is, therefore, not surprising that he was thrilled when approached by the Faculty of Health Sciences to consider doing work in that Faculty that would parallel registration for a doctoral degree. It appeared that the Faculty's Transformation and Equity Working Group attracted outside funding and thus it thought of supporting a qualitative study in the Faculty that would survey the texture of life as experienced by staff (particularly those most marginalised) so as to ascertain the extent of the problem and then devise ways to tackle it head-on. The Faculty had just concluded a symbolic reconciliation exercise<sup>8</sup> and all indications were that the environment was ripe and

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<sup>7</sup> The native was preferred in the early colonial years since the majority white population at the time was of European descent, and, therefore, not native. See, for example, Western (1981).

<sup>8</sup> During colonial and apartheid years, racism had remained a salient feature of South Africa's national life, and institutions of all types colluded with the successive colonial and apartheid administrations in tramping upon civil rights of the mainly black majority population, with the health sector being actively complicit in some of the atrocities – with staff, patients, and students bearing its wrath. As part of the national Truth & Reconciliation Commission (TRC), chaired by the Revered Desmond Tutu, medical schools were invited to make submissions to the Commission as a means of affording them the opportunity to come to terms with their past, and thus pave the way for a healing process to begin. While other medical schools, including the University of the

amenable for further scrutiny. Not once was this researcher proved incorrect. During the entire research process, the researcher received all the necessary assistance that he could have ever wished for, from all quarters, including the Dean's Office. Further, through *ad hoc* assignments with the Faculty's Transformation and Equity Working Group, he had unrestricted access to their databank, as well as to the Faculty's central archives, from which he unearthed valuable documents.

### 1.3 Aims of the Study

Medical doctors who are members of a black community, are often most revered within that community no doubt because of, the scarcity of the skill as well as the usually stricter entry requirements for studying medicine, compared with other, 'softer' occupations. For instance, while careers in nursing, teaching and the priesthood had remained the most plausible for a black person under apartheid, medicine and allied professions (such as occupational therapy, physiotherapy, dietetics etc.) were a rarity and those that managed to scrape their way through received much acclaim. The purpose of this study, therefore, is, through applying Critical Race Theory (CRT), to explore how race and racism have remained central features of South Africa's national life even at one of the seemingly most prestigious<sup>9</sup> of institutions, the University of Cape Town's Faculty of Health Sciences. In exploring the texture of life at this predominantly white medical school, the researcher divided his sample into two main groups, namely, the black registrars<sup>10</sup> and the white members of the academic staff. The researcher's intention was to seek answers on recurring questions around notions of centrality and peripherality vis-à-vis race and racism, which without doubt seemed inherent constituent elements of South Africa's social reality. However, the researcher also intended to seek clarity, empirically that is, on the following sub-questions:

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Witwatersrand's Medical School in Johannesburg, dutifully heeded the call, the University of Cape Town's Medical School failed to appear before the TRC. However, questions about its unsavory past lingered on, to the point that an in-house qualitative study, involving past students and members of faculty, was commissioned in a bid to get first-hand accounts of their experience with discrimination and racism at UCT. Parallel to this was a call for a special Faculty assembly at which the Medical School would formally acknowledge its racist past and commit itself to a new ethos of, *inter alia*, non-discrimination, a supportive culture, and employment equity.

<sup>9</sup> The University of Cape Town is the oldest South African university, tracing its roots back to 1829. It is also the highest-ranked African university on the world university rankings while also boasting the highest concentration of A-rated scientists.

<sup>10</sup> Registrars are the equivalent of medical residents in the United States and Europe. While fully qualified medical doctors, they enrol with a recognised medical school to receive specialist training and ultimately a qualification granted by a competent college for that purpose.

- How do black registrars as racialised subjects themselves experience UCT's Faculty of Health Sciences (this is assuming that race and racism are central features of their experience)?
- Is there a uniform black experience?
- How do white academic staff experience UCT's Faculty of Health Sciences and how does their experience as members of the host society compare to that of blacks; and further, how is their whiteness employed in articulating both their experience and what they surmise to be the black experience at the medical school?
- When decoding the phenomenon of 'at home', is there a fixed centre and periphery which are then circumscribed by race? That is, could whites (with their host status notwithstanding) still tilt intermittently towards the periphery? Conversely, is peripherality necessarily a permanent locus for blacks in predominantly white environments?

#### **1.4 The Structure of this Thesis**

Chapter Two of the thesis details the theoretical framework and associated review of relevant literature. It proceeds firstly with an outline of Critical Race Theory (CRT) as the overarching theoretical framework for the thesis, with a brief discussion of its four basic tenets: namely, the centrality of race, interest convergence/material determinism, social construction thesis and the black voice thesis. As discussed in this chapter, the framework presupposes firstly that race (and racism) are central features of South Africa's social fabric (given the country's long history of colonialism and apartheid that upheld white supremacy). Secondly, it argues that given the centrality of race, the interests of various white classes on account of their shared membership converge to safeguard their whiteness and thus profit from it. For example, both poor whites and affluent middle-class whites may share the same level of prejudices against blacks (and can both collude to keep them in oppression) since these may be seen to be in the interest of both groups of whites. Thirdly, it is presupposed that race is a social construction rather than a biological reality and is kept current to meet certain goals. The fourth component is concerned with giving the black silenced voice a platform for the self-articulation of its social condition, rather than its deference to whites as experts on blacks. Here, one has to have a particular interest on social justice.

The last section of the second chapter reviews the relevant literature. It starts with a subsection on black experiences in white milieus which is divided into three parts. First, those that endure the hegemony (and wrath) of whiteness; second, those that dare to challenge its hegemony; and third, those that seem to see no colour (the case of ‘colour-blind blacks’). The black experiences are then contrasted with those of whites, particularly, in terms of a propensity and apparent readiness to see no colour. The subsection then postulates that this mode of colour-blindness is not a uniquely South African phenomenon, save to mention it is most acute in South Africa given our racialised historical past. The chapter concludes by discussing non-racialism in a post-apartheid context, and asserts that calls for non-racialism (colour-blindness) may be hideously racist as, to a greater extent, they impede the effort towards addressing current social inequities premised primarily on race. This debate is supplemented by employing Bonilla-Silva’s (2001) typology of colour-blindness, with the most prevalent in South Africa being abstract liberalism and the minimisation of racism.

Chapter Three describes in broader terms the evolution of higher education in South Africa. It traces this history from colonialism through to apartheid and concludes by outlining the higher education policy efforts of the post-apartheid administration. This provides the overall legislative framework within which the reform and/or transformation of the sector is to take shape. The chapter shows how race (and racism) has been a defining feature of South African higher education historically and that therefore it is in this context of the new environment of redress that it continues to dominate as a marker of past disadvantage. This chapter is an important one, as it describes the social and historical context needed to decode the texture of life at the University for both blacks and whites.

Chapter Four catalogues the University of Cape Town’s experiment with the transition through enumerating three strands at which this may be assessed. These are student equity, staff equity, and institutional culture and/or climate. It is important to detail the University’s experience with the transition period so as to draw parallels between this and the actual life experience as felt, narrated, and interpreted by black respondents in the mid-section chapters. Particular reference is made to the UCT’s Faculty of Health Sciences, where the student equity admissions policy (especially as it relates to minimum thresholds of entry into the MB ChB programme) and the curriculum reform process paved a way for the primary health care approach to medical training. This approach also sought to challenge the traditional biomedical model of training, converting it into one that advocates holistic care. It shows how



both the curriculum reform effort and the equitable student admission policy became a major source of discontent among those who feel more comfortable with the status quo. At the very heart of these battles during the transition period were white protagonists, demonstrating here their willingness to curry favour with the state, when circumstances so dictated. Moreover, this chapter provides the context for the case study, outlining the particular employment patterns and relationships in the Faculty of Health Sciences of which academic members of staff and registrars (resident specialist medical trainees) form part.

Chapter Five outlines the methodological approach employed in the research. The research resides within a qualitative paradigm, given the nature of the matter to be investigated. The researcher concedes, however, that there may well exist quantitative research instruments that could have assisted in deciphering the subject matter under investigation. That notwithstanding, as the thesis's objective is to also foreground the black voice (and ultimately the black experience), it was important that this voice be given the epistemological privilege of describing the black condition in the manner that it so wished, employing its own vocabulary - in respect of which a more quantitative approach will have been somehow limiting.

It is further explained in the chapter that the research borrows from feminist approaches, in that it pays particular attention to the location of the researcher in the actual research process as both an 'expert' and a participant, given his long-standing association with the research site (by site here, the researcher refers to the overall University of Cape Town environment, of which the Faculty of Health Sciences is part). He is mindful of his assumptions, presuppositions, and life experience that are also tinged by race (and racism) given that as a black male South African of African descent, he too is a highly racialised subject. Given this background, this researcher, therefore, claims not to be a disinterested neutral observer but instead, is conscious of his role in the research in constructing (reconstructing) reality together with his research subjects. He issues a caution that he remains conscious of these multiple roles - a key requirement in the feminist research paradigm.

Chapter Six is about the reporting of the empirical results in the thesis which illuminates the experiences of black medical registrars at the University of Cape Town's Faculty of Health Sciences. From the analysis of data in the interviews held with the black medical registrars, three narratives emerged. Chapter Six, thus, is divided into three parts. The first narrative

involved black registrars who not only articulated their experience in racial terms and have contended with racism but also those who seemed to have surrendered in the fight to stake a claim at the UCT Faculty of Health Sciences. This might explain their resolve to leave upon completion of their registrar training programme. In the second category are those whose experiences with the Faculty are similar to that of the first group, but nonetheless have resolved to stake a claim to make the institution also theirs. They have steadfastly challenged the hegemony of whiteness. The third group in the chapter were those registrars that purported to see no colour, and with their classical neoliberal<sup>11</sup> leanings, they touted individual effort as the panacea to all black woes, and either were apparently unaware of the marginalisation of blacks, or minimised the black experience with racism.

Chapter Seven is important as it presents the experiences of senior white academic members of staff at the University of Cape Town's Faculty of Health Sciences. The main purpose of the chapter is to draw comparisons between their lived experiences as members of the host society with those of their black registrars. While it would be shown that this group of white academic staff, in general, tended to camouflage privilege and minimise the black experience with racism, similarly, it shall become clear that they felt generally 'at home' in, and have a greater sense of affinity with the medical school than arguably do blacks. What the chapter highlights, nonetheless, is the degree of variability of the white experience. In other words, while the chapter attests to a kind of rootedness that they have to the medical school, their rootedness and sense of home was variable, contingent on such factors as, for example, gender, academic rank, type of school attended (private, church or public school), and the efficacy of their social networks. While there may be some whites who felt they were marginalised, the degree of their marginality tended to be mitigated by their whiteness. That is, they still remained part of the centre instead of joining the ranks of their black colleagues on the periphery. Put differently, they intermittently became part of the peripheral-centre. That is, although they appeared to have felt as outsiders, and thus on the periphery, their periphery was of a different kind (very much so from the black periphery), as it simultaneously remained an integral part of the white centre. This demonstrated the staying power of whiteness and the durability of race in the construction of social reality.

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<sup>11</sup> The use of the concept neoliberal is only meant to articulate a disposition in sync with traditional liberalist values, whereby the individual (as opposed to their racial group) is at the centre. It is in no way meant to be disparaging or prejudicial as a descriptor. Further, the use of the concept is necessitated by trending in the data relating to Narrative Three registrars where there is an overemphasis of individual effort and not so much one's racial membership. The trending referred to will be evidenced more in the next chapters on data and analysis.

Chapter Eight relates the three black registrar narratives and the white academic staff grand narrative to relevant literature and the overarching theoretical framework informing the study. The theoretical framework of CRT and the literature assisted greatly in the meaning-making endeavour. The framework provides a perceptive lens with which the data presented was understood, while the literature situated data and its analysis within the appropriate socio-historical context. The thesis ends in Chapter Nine with a set of conclusions arising out of the entire research process. In so doing, it highlights the prominence of race and racism at the University of Cape Town's Faculty of Health Sciences. A set of recommendations concludes the thesis. These aim is to ameliorate the 'black problem' in particular, while also seeking to strengthen the University of Cape Town's Faculty of Health Sciences' transformation project in general.

University of Cape Town

## CHAPTER TWO

### Finding a Theoretical Framework and Literature Review

#### 2.1 Introduction

This chapter starts off by outlining Critical Race Theory (CRT) as a theoretical framework for the thesis. It begins by tracing its roots to Critical Legal Studies (CLS) and then highlights some of its most overt shortcomings, for example, that empathic white scholars, by virtue of their group membership, have an inherent distance in respect of how blacks experience racial oppression. This inevitably limits their ability to contribute to knowledge production and stay the course. These limitations are crystallised through the four basic tenets of CRT which are discussed extensively below.

The second part of the chapter is a discussion of relevant literature drawn, in part, from the very tenets propagated by CRT. Three thematic thrusts are posited, all with special reference to the notion of black and white milieus. The first deals with the phenomenon of blacks in white spaces and the agony of their having to endure the wrath of whiteness. The second is around blacks who are in the same predominantly white milieu but who dare to challenge the seemingly indomitable hegemony of whiteness (and its attendant brutalities). The last thrust introduces a discussion on a matter so far grossly under-researched – that is, the case of ‘colour-blind’ blacks in white environments. In this instance, the researcher considers the question whether it is conceivable that blacks, as racialised subjects themselves, can successfully claim that they see no colour.

The chapter then continues by looking critically at whites and their claim of seeing no colour. Here much of the literature concurs with Magubane (2001:31) who asserts, rather matter-of-factly that ‘colour-blindness’, in a society marked by class, gender and spatial disparities born of the structural injustices of capitalism, themselves entrenched by a legal system of racism, which over a long period of white minority domination guaranteed white privileges, is disingenuous and bad faith’. Thus, ‘colour-blindness’, as a form of dominant racial discourse, tends to be employed interchangeably with ‘non-racialism’ in a post-apartheid South Africa. However, ‘colour-blindness’ has been met with scepticism as critics see it as euphemism for a new hidden form of racism as they charge that the racial discourse of ‘colour-blindness’ works effectively at entrenching the status quo, thus leaving intact existing inequalities that are premised on race. Following from this, the chapter discusses these colour-blind frames

employed by whites, but also on occasion, used by some blacks as a political and social perspective of their own.

## **2.2. Theoretical Framework: Critical Race Theory (CRT)**

The research process did not begin with a set of already-fashioned theoretical lenses. Rather, this emerged as the research process unfolded, particularly upon the close reading of data as the researcher agonised to make sense of the research puzzle from recurring overarching themes during the initial analysis. Theory here is understood to be a set of interrelated ideas, concepts and assumptions which, when fused together, cohere into apparent suppositions or hypotheses which then provide lenses through which social reality or phenomena can be reasonably understood. As part of the research process – having made assumptions that race is the central organising force through which social relations are mediated and that racism in South Africa, given the country's socio-historical past, is inscribed in almost all facets of national life – the researcher accordingly elected to apply Critical Race Theory (CRT). This theoretical frame seemed most appropriate, given South Africa's own experience with race and the implicated binary of white superiority and black inferiority interwoven into its history from colonialism through apartheid.

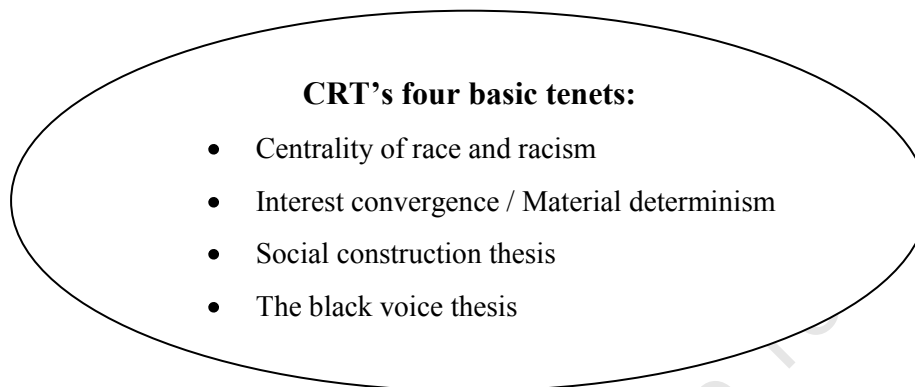
What then, concretely, is CRT? Much of the scholarship<sup>12</sup> that has expounded on the theory has appropriated it into social research analyses. Taylor (1998) unpacks CRT from the particular perspective of challenging whites and whiteness as the normative standard through which all of life can be interpreted and understood. Thus, instead of assuming whiteness as normative (normal), it purposefully foregrounds the lived experiences of black people with racial oppression. Implicit in this is the particular idea that it is necessarily grounded on the requisite socio-historical context which ought always to be an integral part of social analysis. This call to context appositely 'insists that the social and experiential context of racial oppression is crucial for understanding racial dynamics, particularly the way that current inequalities are connected to earlier, more overt, practices of racial exclusion' (Taylor, 1998:122). While this is an abomination for positivist-inclined social theorists, Taylor (1998:122) further insists that at its heart CRT analysis is an open acknowledgement

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<sup>12</sup> See, for example, Delgado and Stefancic (2001) and Crenshaw et al. (1995). The latter is a collection of contributions by various authors to this theoretical strand, demonstrating in various ways, mainly through storytelling, the extent to which race and racism continue to give expression to what may, on the surface, seem fair, innocuous, logical and common cause. Refer also to the seminal work by Solorzano, Ceja and Yosso (2000).

of the subjectivity of perspective, and an understanding that ‘perceptions of truth, fairness, and justice reflect the mindset, status, and experience of the knower’. In an attempt to theoretically and conceptually disentangle CRT, Delgado and Stefancic (2001), in their introductory text on the theory, postulate four pillars on which CRT may be premised. See *Figure 1*, below, and the ensuing discussion.

**Figure 1**



### ***2.2.1 The Centrality of Race (and Racism) to Everyday Life***

The centrality of race advances a particular idea of racism as an ordinary part of the body politic – as a common lived experience of most blacks. In other words, it seeks to advance a particular view that confirms the ordinariness and normalness of racism in contrast to the usual neoliberal stance that seeks to cast racism in more aberrational terms, (Delgado, 2000: xvi). Hence, Taylor (1998:122) asserts that ‘individual acts of racism are not isolated instances of bigoted behaviour but a reflection of the larger, structural, and institutional fact of white hegemony’. The question is not so much whether or how racial discrimination can be eliminated while maintaining the integrity of other interests implicated in the status quo. Instead, argued Lawrence (1993:6), we must ask how the status quo buttresses racial subordination. Feagin and Cobas (2008:40) sought to lay bare this matrix of the status quo and racial subordination by positing what they call a ‘white racial frame’ or ‘white common sense’. They cogently argue that this frame is pervasive, since at its very heart, it contains the dominant white society’s deep assumptions, or *weltanschauung*, about itself vis-à-vis the marginal fringe other. As a result, a hegemonic situation occurs when blacks, as oppressed others, appear to consent to this dominant white racial frame (Feagin and Cobas, 2008:39). Such reciprocation by oppressed groups, resulting in racism being rendered normal and invisible, is also underscored by Hill (2007). Elsewhere, French sociologist Pierre Bourdieu (1990:133) characterised this phenomenon as symbolic violence, usually a ‘gentle [and]

disguised form which violence takes when overt violence is impossible'. In other words, symbolic violence happens as it is aided by structures of domination that covertly privilege the dominant groups in society while, simultaneously, dominated groups fail to recognise their subordination and, ultimately, their oppression, by internalising these as normal, natural and, thus, unproblematic.

The normality and invisibility of racism in everyday life prompted Derrick Bell to advance a view (often deemed too radical and self-defeating by some<sup>13</sup> of his allies) that racism is a permanent feature of modern society. Race is an overreaching feature of life in day-to-day South Africa (Macdonald, 2006). Some social analysts, although they grudgingly acknowledge the omnipresence of white racism, explain it in terms of black inferiority, which they charge, props up white supremacy (Ramphela, 2009). With a particular focus on medical trainees and the normality of racism in South Africa, Professor Len Karlsson, former Professor in the Department of Community Health at the Medical University of Southern Africa (MEDUNSA), has a story to tell. In one of his field trips with medical students to Pretoria, South Africa's capital and the bastion of white Afrikaner nationalism, he uses his story to demonstrate this supposed normalcy:

On one occasion we were to visit a large steel smelting works in Pretoria. It was immediately apparent that the person who was to meet us and organise the tour was a very conservative Afrikaner. He was totally overwhelmed by a busload of fifty young black people (all potential doctors) and immediately started shouting and ordering the students around. His choice of language was, to say the least, totally unacceptable. He had probably been expecting white students... but it was the students' reaction that I found most remarkable. They obeyed the man's instructions without a murmur... The following day at the lecture, I expressed my embarrassment at what had happened and how degraded they must have felt. To my surprise, the whole class laughed. When I asked for an explanation of the mirth, a student said, "Prof, don't feel bad. We experience this sort of treatment almost every day". I felt humbled. How little I understood.

(Karlsson, 2009:10)

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<sup>13</sup> See, for example, Eduardo Bonilla-Silva (2001) [see, in particular, the introduction].

The use of CRT in illuminating the black experience at the University of Cape Town's Faculty of Health Sciences need not presuppose that the researcher is ignorant of some of the lay criticism that has become part of the ordinary discourse on race in South Africa. For example, those South Africans still lulled by the 'Mandela magic' of 1994 (and its characteristic overture meant to lure into the fold a rather discerning and sceptical South African white public) would find the idea of privileging the black voice exclusionary and therefore not consonant with the ideal of 'nation building', that is, the view that black and white South Africans must forget about their divisive past and simply 'just get along'. Their platitudinous cynicism is shared by the neo-conservative wing of the US black intelligentsia, for example, D' Souza (1996) in his magnum opus, *The end of racism*. D' Souza decries the civil rights effort post the Martin Luther King Jr. era as more of an 'industry' – a kind of a cause that had become a black bourgeois pastime, rather than a preoccupation meant to effect meaningful change for its intended recipients. Here, D' Souza confuses subsequent successes of some in the black community (those blacks who have steadily climbed up to middle and upper stratum of American society) to imply the proportional gravitation of race into insignificance.

### **2.2.2 Interest Convergence/Material Determinism**

This thesis advances a particular view within the broader CRT movement that holds that there exists a social compact among whites that may even cut across the class divide with the result that 'the interests of blacks achieving racial equality could be accommodated only to the extent that they appear to converge or seem in unison to those of powerful whites' (Taylor, 1998:123). That is, white elites will tolerate or encourage racial advances for blacks only when they also promote white self-interest (Delgado, 1995: *xiv*). Because the interests of the dominant white classes converge and all whites, however diverse, benefit materially from black subordination, there is therefore little incentive for them (with all the good intentions) to work towards eradicating racism (Delgado and Stefancic, 2001). It is not only class that plays second fiddle when it comes to white interests. As bell hooks (2000:375) argued, 'racism took precedence over sexual alliances in both the white world's interaction with Native Americans and African Americans, just as racism overshadowed any bonding between black women and white women on the basis of sex'.

CRT proponent Crenshaw (1993:114) by positing what she calls structural intersectionality argues, like bell hooks, that women (both black, and to a lesser extent, white) are situated



within overlapping structures of subordination. In the context of South Africa, whites, although a noticeable minority, wield enormous power and influence across the spectrum of gender, class, and cultural-linguistic divide. In this regard, race seems to trump the gender divide as well as other markers of distinction such as culture, class religion, and language. For instance, while patriarchy may still remain an Achilles heel for white women, white men and women may, at the same time, recognise their common interests - and the potential dividends to be gained by keeping black men and women out. Even when it comes to white ethnicities, while doubtless there may still be bad blood between the white Afrikaners and English-speaking whites, given the lingering memories of the South African War, the two seemingly warring white groups may collude by keeping the status quo in their favour for they recognise their collective interests as a group: they recognise that as a group their interests converge rather than being oppositional.

bell hooks (2000:375) made a similar point in the context of the United States where the supposed 'sisterhood' always played second fiddle to racial identities, thereby underscoring the primacy of race. She argued, for example, that 'as victims of racism, black women were subjected to oppressions no white woman was forced to endure'. She then further elaborated that 'white racial imperialism granted all white women, however victimised by sexist oppression they might be, the right to assume the role of the oppressor in relation to black women and black men'. This too, supports the argument presented here, that white interests almost always converged, making nonsense of class, gender, language, cultural, religious and other divides. In this scenario, where white interests are in unison while black interests may appear to cause some rupture to the status quo, CRT adherents argue that there then was little (if any) incentive for meaningful social change given the potentially 'disadvantaging' effect of such change on white interests.

At the heart of interest convergence/material determinism is the idea that the material and psychological benefits that accrue to whiteness necessarily dissuade whites from partaking in legitimate social justice causes should these appear to challenge the very privileged status of whiteness from which they continue to profit materially. For example, in South Africa, the white ruling capitalist class did not only look to serve its own class interests but also those of other whites considered poor and uneducated through, for example, the job preference legislative regime during apartheid. Similarly, as class interests converged, whites acting in concert built a strong social contract that is yet to be dislodged since whites to an extent have

little inclination to tinker with the status quo on account of this very convergence across and between white classes. For instance, Macdonald (2006:28) in his major work on South African race centeredness draws parallels between the conservative and the liberal wing of the white population by pointing out that white liberals (although purporting to support the idea of a non-racial society) spared no effort in canvassing for group rights in much the same way as the conservative white right-wing Afrikaners did. Macdonald argued that both these groups shared the same conservative interests in a bid to preserve unearned privileges on account of their race.

### ***2.2.3 The Social Construction Thesis***

The social construction thesis holds that race and races are products of social thought and relations (Delgado and Stefancic, 2001:7). A social constructionist paradigm therefore seeks to refute all essentialist beliefs about race, that they are, for example, biologically determinable and fixed, that there are superior and inferior races, and that these arise out of nature. It proceeds from a particular premise that human beings are products of socio-historical processes. Benedict (2000) illustrates how constructions of race metamorphose and straddle between language, culture, hereditary bodily traits (and non-hereditary traits), and geographic locations in an implicit disputation of racial essentialism. Her point is further expounded by Winant (2000:185) when he decodes the theoretical status of race and asserts that ‘the meaning and salience of race is forever being reconstituted in the present’, meaning that human communities continually make and remake race.<sup>14</sup> Therefore, there is recognition, as James (2001:236) states, that ‘while race is a biological fiction, it is nonetheless a social fact’. In other words, as Delgado and Stefancic (2001:7) further postulated, ‘races are categories that society invents, manipulates, or retires when convenient’. As a simple example to illustrate the point, the reader might wish to consider the changing census of racial designations in the United States and South Africa over different times in the history of both countries and their attendant social meanings – for example, the migration from ‘Negro’, to ‘black’, to ‘coloured’ and then ‘African-American’. In South Africa, whites migrated from ‘Europeans’ to ‘whites’, while blacks moved between ‘natives’, ‘blacks’ and ‘Africans’. This supports the point that racial construction is an ongoing social process, never reaching an end point. However, a CRT social analysis would always insist on using racial categories, however ‘unscientific’, since they have social consequences for those so named. Further,

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<sup>14</sup> See also Hall (2000)

CRT implores us to bring to bear in our social analysis the attendant socio-historical context which would direct the process of understanding how the wrongs were created - the consequences of which linger today - and how to undo them. Such redress requires that we name the wrong, the perpetrator, and the resultant victims. In this instance, the naming is neither about reifying race nor racial categories, and in doing so, lending them some undue legitimacy. Rather, it is about undoing the wrong so that a fairer, just and equitable dispensation can come about.

#### ***2.2.4 The Voice-of-Colour/the Black Voice Thesis***

This thesis presupposes a 'deliberate choice to see the world from the point of view of the socially subjugated groups, to implicate our social and economic positions within society and to search for avenues to a more just world' (Duncan, 2002:87). Propagating for the privileging of the black voice is crucial in CRT so as to quell the debilitating effects of anonymity, and the estrangement of being without a name, (Williams, 1995:90). Here, the black voice thesis holds that, because of their different histories and experiences with oppression, racially oppressed groups may be able to communicate with their white counterparts on such matters that white observers are unlikely to see (Delgado and Stefancic, 2001:9). Their status, in other words, 'brings with it a presumed competence to speak about race and racism'.

There are some scholars in the black community, for example, Kennedy (1995), who have unrelentingly derided the racial distinctiveness thesis as problematic, since its proponents seem to conflate a person's racial category to the substance of his/her or scholarship. However, most blacks in the United States have observed what they saw as the minimal gains accrued from the civil rights era being taken away with the active support of the courts. Here in South Africa there are lingering questions as to whether the gains of post-apartheid democracy have not instead privileged whites more. In this context, then, it becomes important to emphasise the experiences of those who have contended with oppression. Black scholars, thus, have a singular role in this as they may well know the injury and, without fail, could then name it. This explains black scholars' discontent with CLS, dominated as it was by white scholars who sought to minimise the effect racism had on modern society. It is particularly this failure of white CLS adherents that provided fertile ground for the unique and special contributions of black scholars to race analysis. It is thus shown that by not naming and experiencing racial victimisation, the white CLS adherents unwittingly

legitimated, if not reinforced, oppressive social structures. It is not surprising, then, that they have always been looked upon with suspicion by black scholars and their oppressed constituencies, even when they were selfless social change agents devoted to the cause of social justice. This struck at the very core of CRT which made a specific commitment to social justice as one of its founding pillars. As Solorzano, Ceja and Yosso (2000:63) further elaborated:

When the ideology of racism is examined and racist injuries are named, victims of racism can find their voice... Further, those injured by racism discover that they are not alone in their marginality. They become empowered participants, [making] and hearing their own stories and the stories of others, listening to how the arguments are framed, learning to make the arguments themselves [all in the act of emancipating themselves from the shackles of the dominant ideology].

CRT's emphasis of the black voice has further caused consternation among conservative observers who declare that there are other 'othered' voices out there that are gratuitously displaced as a result. Maisuria and Martin (2008:23) argued, therefore, that:

We must include all narratives of all those who are marginalised as others. By this we mean stories of students, class, gender, disability, sexuality; victims of bullying, the ignored, the socially outcast, the lonely, those suffering from anxiety and depression...

However, Parsons and Plakhotnic (2006:163) dispute this by arguing that CRT 'must challenge ahistoricism and strive to pursue a contextual and historical analysis when investigating social issues'. Besides, most CRT analyses do acknowledge that race (as an overarching marker of human difference) intersects with other axes of inequality. As already indicated, CRT proponents from the feminist tradition (hooks, 2000 and Essed, 1992) have made similar points in addressing the double bind<sup>15</sup> black women usually find themselves having to contend with.

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<sup>15</sup> Double bind articulates a particular proposition that black women suffer various patterns of discrimination that hinge on their status in society in the first instance as black and then in the second instance as women. In other words, these patterns of oppression are very often aggregated in terms of twin societal ills of racism and patriarchy.

Ladson-Billings (1998), a fervent proponent of CRT, traces its genesis to early dissent arising out of a discontent with the established body of legal thought within Critical Legal Studies (CLS) which was essentially white-dominated, and did not seem to demonstrate an unflinching commitment to working practically towards the elimination of dominant structures of oppression. In expounding on her point, Ladson-Billings cites a critique by Cornel West, a respected African-American philosopher and social critic who, when referring to the failings of CLS scholars, chided that theirs is not necessarily 'a constructive attempt to put forward a conception of a new legal and social order. CLS is more a concerted attack and assault on the legitimacy and authority of pedagogical strategies in law school than a comprehensive announcement of what a credible and realizable new society and legal system would look like' (West, 1993 cited in Ladson-Billings, 1998:11). One of the leading thinkers in the emerging movement (CRT), Derrick Bell (1995:22), was to make a similar observation:

Whites may agree in the abstract that blacks are citizens and are entitled to constitutional protection against racial discrimination, but few are willing to recognise that racial protection is much more than a series of quaint customs that can be remedied effectively without altering the status of whites. The extent of the unwillingness is illustrated by the controversy over affirmative action programs, particularly those where identifiable whites must step aside for blacks they deem less qualified or less deserving. Whites simply cannot envision the personal responsibility and the potential sacrifice [occasioned by their declared desire for equality].

In other words, implicit in Cornel West's logic is that CLS, while offering an insightful critique of the structures of oppression, rarely offered strategies towards their ultimate collapse. In decoding this paradox, Derrick Bell (1992), noted that CLS adherents were mainly white and male, speaking for and on behalf of the oppressed blacks. While it may have been imprudent to question their bona fides, Bell held that in such a situation commitment among whites may waiver where their legitimate actions might pose results uncomfortable to them as members of the privileged group themselves. CRT scholarship was thus seen not only as a vehicle for black scholars to contribute in their own terms to knowledge production, but also as an instrument for black affirmation in general. A South African parallel, although of a

different kind, would be what is loosely referred to as the black consciousness philosophy championed by Steve Biko in the early 1970s, which also critiqued unceasingly the involvement of white liberals in the South Africa's struggle for liberation. He saw white involvement as psychologically inhibiting to blacks, since the racial power structures still remained intact even at the point of close contact and cooperation between the privileged empathetic whites and the oppressed blacks (Biko, 1978). Elsewhere, this is characterised as 'false empathy'.<sup>16</sup>

While CRT-based scholarship received much traction from the watershed CRT conference in 1989 in Madison, Wisconsin with, among others, Derrick Bell, Richard Delgado, Mari Matsuda and Kimberlé Williams Crenshaw as proponents, it would be remiss to exclusively situate it in that temporal context since much had been written before this time. Most notably, the early scholarship of Frantz Fanon<sup>17</sup> and, particularly, W.E.B. Du Bois,<sup>18</sup> makes specific accounts of foregrounding race and laying bare the hitherto unspoken truths of black/white power relations from the perspective of the oppressed blacks. CRT, therefore, as Du Bois and Fanon would have declared, is about giving black scholars a voice, particularly in respect of those social phenomena with which they have a direct experience by virtue of their blackness.

Overall, critics of CRT have spared no effort in deriding it for its 'pseudo-science', for its supposed lack of rigour and overdependence on narrative (which is fraught with emotion) as part of social analysis. It has, however, been its apparent betrayal of almost sacrosanct liberal democratic ideals that has attracted most criticism, as illustrated in Maisuria and Martin (2008:5). They observed that 'insofar as they [CRT theorists] too are committed to a just and fair society, [they] must make the same normative presuppositions – justice ought to be extended to all persons and the normative force of the critique of race could not be possible without such a commitment'. It is, however, noteworthy that heavy weighting on race need not necessarily presuppose ignorance of other forms of oppression. It is not argued anywhere

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<sup>16</sup> See, for example, Tate (1997).

<sup>17</sup> Fanon (1986).

<sup>18</sup> Du Bois (1903).

that public policy and attendant decisions can, in race-centred societies, be explained solely in terms of white racism. Rather, the argument has always been that while other modes of oppression such as sexism, homophobia, Islamaphobia and so on, are also important tools of analysis in decoding oppression, it would be naive to discount the overbearing omnipresence of race in modern life. As Du Bois (1903:3) prophesied, ‘the problem of the twentieth century is the problem of the colour-line’. This does not mean that the class struggle and gender oppression were not critical to social analysis. Rather, Du Bois had wanted to highlight what he saw as the most glaring hallmark of oppression, white supremacy. In race-centred societies, social ills such as hate crimes and rioting as responses, have arisen more out of the colour question than, for instance, as a result of gender and other noteworthy struggles.

However, Picart (2007:221) avers that ‘Bell’s position reifies and strengthens, rather than deconstructs structures of tyranny; it maintains the problematic rhetorical construction of ...race relations in terms of the black-white divide, either alienating, or leaving little or no room for other racial groups to constructively revise power and identity’. While there may be some merit in Picart’s argument that social analysis must guard against racial essentialism (the idea that blackness and whiteness have an essence), Bell, as a CRT proponent, weaves personal experience as a black ‘othered’ self into his social analysis and how that ‘othered’ self encountered and viewed whiteness: hence the black-white binary. It is not intended to exclude other oppressed racial groups who, although marginalised, may find themselves outside of his propounded binary. Like Maisuria and Martin (2008), Picart (2007:223), too, charges that Bell’s preoccupation with race tends to oversimplify the ‘complex and undulating landscape of race [when taking into account] other factors such as gender and class’.

## **2.3 Literature Review**

### ***2.3.1 Blacks in White Spaces: Enduring the Hegemony (and Wrath) of Whiteness***

Literature on blacks in white spaces, in the context of the academy, paints a social category of people in distress and this will become more apparent when data on the registrar narratives is presented, more especially the first two narratives of black registrars. They are faced with chilling isolation, indignation, scant collegial support and a fragmented sense of self (at times raising questions of self worth). In the context of the white spaces referred to, this black distress usually manifests itself through recycling – a condition where blacks flee from one

white space into the next, lured by supposed positive imageries of the other white space, only to find that almost all white spaces retain a distinctive imagery of themselves as racially exclusive, irrespective of the socio-cultural and linguistic differences (Potgieter, 2001). For instance, in her empirical work on why black academic members of staff were moving from one institution to the other or leaving the academy altogether, Cheryl Potgieter concludes, *inter alia* that there were those leaving predominantly white English-medium universities in favour of predominantly white Afrikaans-medium institutions as the perception grew that, culturally, Afrikaners contended with the change project more overtly – that is, one knew where they stood in terms of whether they were for change or totally against it. Unlike their English counterparts, Afrikaners were thought to be more sincere and projected less subliminal messages on their attitude towards change compared to their English counterparts. Also, and this is a point which Potgieter once more expounds, Afrikaners, given their historical intransigent role during apartheid, felt under more compulsion to assume the colour of change rather than their English counterparts, who still relied more on their former liberalist tag (as having supposedly opposed apartheid) in order to escape the pressing new demands on them for change. That said, the Afrikaner white space remains principally a white space for blacks – and, thus, variations between the English white space and the Afrikaner white space are only idiosyncratic rather than fundamental. This, then, underscores, in more profound way, the centrality of race – a foremost hallmark of CRT.

Being black in a predominantly white institution has always presented enormous challenges for blacks, both individually and collectively. However, it is on the individual level that Erasmus (2006) places the most emphasis in her analysis of the transformation experiment in a university setting during South Africa's transition from apartheid to a multiparty constitutional democracy. She postulates that isolation in the context of the academy for those blacks in predominantly white environments might have implied the superficial extraction of oneself from the real self in order to remake one in the image and likeness of those in power so as to ameliorate the pain of isolation. Goffman (1990) sees this as a conscious social process of face work that cannot, after all, be sustained in any real sense since, as Jansen (2009:21) contributed, it is a difficult process for which a lot of emotional investment is required.

Current literature corroborates this seamless storyline of black distress and white hegemony. Recent work by Hall and Surtee (2009) decodes the experience of a black professional class



in senior and middle-management positions in three sectors of the economy (petrochemical, retail, and financial services sectors). Their findings point out to racial fault lines that account for gross unhappiness by black senior and middle managers. Fewer blacks get promotion or recognition for excellent work, and career development opportunities were rarely apparent. All this contributed to a chilling climate that respondents characterised as racist. It must be added, however, that Hall and Surtee's work had in it a unique geopolitical dynamic in that the survey concentrated mainly on the Western Cape province of South Africa and, in particular, the City of Cape Town, both of which had become strong political enclaves of white opposition politics in South Africa. The City of Cape Town since 2006 has been under the political stewardship of the conservative white Democratic Alliance (DA) which is the official opposition to the ruling African National Congress (ANC) - a leading black nationalist liberation movement that led the national and global anti-apartheid effort.

Perhaps the most chilling account of the black experience in white spaces is the scenes of black humiliation at the University of the Free State instigated by white Afrikaner male students on black workers at the university.<sup>19</sup> Subsequent public outrage prompted the then Minister of Education, Naledi Pandor, to gazette an inquiry led by Professor Crain Soudien whose brief was, among others, to look into the extent and nature of racism and racial discrimination in public higher education, resulting in the 'Soudien Report'. While generally racism in the post-1994 context had morphed from overt manifestations, given the taboo status it has assumed, to have observed and heard of these most overt and obscene manifestations of bigotry was most disturbing. The University of the Free State affair again served as a chilling reminder that much as we have a celebrated new dispensation of democratic constitutionalism, marked by observance of fundamental human rights, racism has simply not fizzled out in some of the nation's most elite institutions; thus again, making a case for the centrality of race and racism as propounded by CRT. As will be shown by data in

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<sup>19</sup> On 23 March 2008, three white male students living at the Reitz Residence of the University of the Free State showcased an infamous video in which black cleaning staff members were humiliated to unimaginable proportions. In this video, the three white male students are seen (among many other denigrating acts) offering food and drink which had been urinated on by one of their number to the black cleaning staff. Quirkily, the white students claim in the video that this was meant to demonstrate that relations between blacks and whites were sound at this particular residence. As would later be confirmed, these acts of humiliation by white students were a form of protest against the University of the Free State's overall policy of racial integration in its residence system. The University of the Free State, formerly the University of the Orange Free State, during apartheid was an exclusively white institution of higher learning meant to accommodate white Afrikaners and used Afrikaans as its formal medium of instruction. While in the post-apartheid period it has seen a trickle of blacks enter the staff and student body, it has remained predominantly white.

the first narrative on black registrars, black registrars who are enduring the wrath of whiteness seem to relate incidents that almost border on overt forms of racism.

### ***2.3.2. Blacks in White Spaces: Daring to Challenge the Hegemony (and Wrath) of Whiteness***

The second narrative of black registrars in the thesis intimates a body of literature that points to a precarious black sense of place in a predominantly white academic milieu. Ambivalent feelings towards the institution may intermittently become commonplace as this disconnect to the white environment is mitigated by scant support or the feeling that although there might be racism, it has not been meted out at them directly – it is an experience they see from afar. This ambivalence is well articulated by Kennedy (1993: xxx) in his brief introduction to a collection of autobiographies of black members of the academic staff and students at Harvard University:

Ambivalence is the word that best captures the way in which most African American students, professors, administrators, guests, and alumnae seem to have perceived, and reacted to, Harvard. Many of the documents that follow give voice to African Americans who feel, simultaneously, admiration for Harvard's traditions and desire to reform the institution, a sense of accomplishment derived from association with Harvard and a sense of sorrow or even guilt that this privilege is beyond the circumstances of the great mass of black Americans, a yearning for acceptance and a desire to remain rebellious outsiders, recognition that Harvard has sought to make itself more hospitable to African Americans and anger that the nation's leading university has failed to do more.

While blacks in the United States were relegated to a marginal status and hardly participated en masse in the American academy, they however stand starkly privileged compared to their black counterparts in South Africa given the paltry rates of black participation in higher education in South Africa, particularly in the historically white universities privileged under apartheid. In looking at international literature that illuminates the black experience (particularly out of the United States) much of the empirical accounts perused paint a picture of a small but daring contingent of black members of academic staff, who, despite the

humiliation and alienation they may suffer, <sup>20</sup> have the resolve to stay the course. The literature is, however, varied in explaining the social conditions underpinning such resolve. In other words, although blacks in the United States and in South Africa have, in the main, a collective experience of displacement (of not belonging) in historically white institutions, varied underlying social and historical processes underpin and account for the varied responses to white oppression in the academy.

Cross (1971 cited in Allison, 2008) presents black racial formation or consciousness with one particular phase in this racial identity odyssey accounting for the apparent posture of black resolve (staying the course). This is best captured in Jansen (2009:19-20) when recounting his experiences of being Dean of Education at the University of Pretoria:

I was and still am an outsider to UP [University of Pretoria]. It was not simply that I came from the outside. It was that I constantly felt an outsider. To be sure, I was generally accepted by my colleagues at all levels of the University, and I can recount only a few occasions of direct confrontation on anything serious. It is, however, not only what individual people did or did not do in response to my presence as academic or researcher or dean. It was, rather, the ensemble of actions, symbols, rituals, and routines together conveying the message that I was from somewhere else... . As an outsider, though, I was determined to be an insider, however incomplete that process and ambition would always be... . I knew I could not be an insider in the fullest sense; but I was not going to stand on the sidelines and either bemoan outsider status or withdraw from engaging on the inside.

Black identity formation is presumed to have three constitutive phases and such social process is seen as critical and thus emphasises the black response to white oppression. In an account relating to the United States experience, Owen (2001) and Jackson (2004) place more emphasis on the stimuli from without as pivotal in the effort to sanitise the ferocity of white oppression. Jansen (2009), a South African academic, does the same by staking a claim to a social space known to him to be not his own. Cross (1971) cited in Allison (2004) posits three typologies of black identity formation namely idealisation phase, encounter phase and internalisation phase. For the first phase, a state of mind presupposes a social condition of

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<sup>20</sup> See, for example, Lucero (2002).

white idealisation by blacks. In other words, blackness on its own is seen as rather inadequate and can only find solace and expression by invoking whiteness into its midst. This, the researcher suggests, may affect the way blacks perceive their experience at historically white universities, and what they see as the *modus operandi* to contend with their marginal status. The second phase involve the real encounter with whiteness wherein, given the hitherto fuzzed truths, blacks may no longer find it possible to idealise whiteness. At this stage, they find themselves having to face white micro-aggressions head-on, with the result that they then even want to be 'blacker', juxtaposing this with a corresponding 'hate-whitey' syndrome. Here, blacks may show more contempt and even aggression and arrogance (however subliminal) towards whites. The last phase of black identity formation is 'internalisation' and it is here that the researcher wants to lay more emphasis, since much of the literature on black experience in white milieus (especially academic) seems to tilt towards a social condition of blackness as internalised. Here, 'blackness need not mean hating whites but rather loving blacks and loving oneself' (Cross, 1971 cited in Allison, 2008:647). As implicated in Jansen (2009) there is a sense of internalisation – a sense of comfort with oneself that is almost a precondition towards engaging with hostile white environments to optimally make a contribution for the betterment of oneself and humankind in general.

However, at the very heart of Cross's arguments is a presupposition that black reliance and resolve, as perhaps demonstrated by Jansen (2009), requires a social conditioning almost independent of whiteness. Thus, not vying for white approval and validation is but one step towards carving black spaces within white spaces. While postulating a useful typology for understanding black social processes of identity formation vis-à-vis whiteness, Cross (1971) as cited in (Allison, 2008:658), tends to uncritically reify and essentialise blackness in accounting for and explaining black resilience as though it were a genetic innate attribute of blacks. For example, Cross declares that 'blackness in and of itself can afford a person a level of strength, power and resilience that he or she might not otherwise gain from other identity factors'. While unsavoury experience and day-to-day humiliations, can themselves account for the resultant inner strength and resilience of the black body, an impression could be created that such attributes are innate in blackness – a charge that a social activist needs to avoid since disparities between blacks and whites were explained in terms of such racist notions presupposing innate inferiority and superiority of certain groups.

Apart from the social process of black identity formation, as expounded in the preceding section, there also is a body of literature lending its gaze to external social processes outside of the individual black person that may account for their marginal status and attendant strategies in rejecting marginality. For example, in Owen (2001), black registrars, while maintaining the clarity of their identity as blacks (in Cross's internalised sense), saw their role as registrars inextricably linked to certain duties, expectations and obligations. These involved having effective mentoring relationships and supportive professional networks, and while this was possible through accessing resources of like-minded whites, blacks in Owen's American study found more solace in support networks among people of their own kind. According to Lucero (2002) such networks are invaluable in early socialisation of black members of faculty into the academy, as they can significantly ward off negative messages such as devaluation, double talk, and silence (being denied discourse, and ending up accommodating instead). Jackson (2004) suggests three loci in the United States at which the solicited support may reside, namely in the church, the home, and generally, in the black communities. The efficacy of these institutions – in terms of accounting for the black experience – will be confirmed by data coming out of the research interviews with registrars. The inward social processes like those of black identity formation (and its various phases), while important, cannot in themselves extricate blacks in the academy from white oppression. In that regard, more outward social processes residing at various loci outside the immediate glare of the oppressed black person, also assist significantly in ameliorating the oppression of blacks by whites.

### ***2.3.3. Blacks in Whites Spaces: the Case of Colour-Blind Blacks***

Racist white rule came to a close in the aftermath of the watershed democratic elections in 1994. This saw a bloodless transfer of political power to the hitherto oppressed black majority and a transition further supported by a Constitution that guarantees equality and plethora of other freedoms in its Bill of Rights. Inevitably the privileged white class rationalised the end of formal apartheid to mean the end of racism since blacks and whites were guaranteed the same rights, freedoms, and obligations.<sup>21</sup> Although there are some differences in the socio-historical contexts in respect of South Africa and the United States, they both have a shared history of tyranny premised on the ideology of white supremacy. Like the oppressed indigenous black people of South Africa, blacks in the United States saw

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<sup>21</sup> See, for example, the Constitution of the Republic of South Africa, Act no. 108 of 1996, in particular, the Bill of Rights (Chapter Two of the Constitution).

what promised to be a new dawn in the advent of the signing of civil rights legislation when segregation was outlawed, and all citizens being guaranteed equal protection under the law, topped up with the right to vote.<sup>22</sup> This turn of events was purported by liberal white America to be the ultimate panacea to the black ‘problem’. With nominal gains, as exemplified by a burgeoning black middle class, the neoconservative wing of the US intelligentsia declared almost matter-of-factly that there was a declining significance of race.<sup>23</sup> This implies that the United States no longer gives the disproportionate weighting to racial differences that it did during the Jim Crow era, and instead had ceased to see colour. While originally castigated as an ill-conceived racist white rightwing backlash at the supposed progress of blacks, curiously though, the colour-blind racial ideology has found fervent adherents even among members of the black middle class, and nowhere is this better exhibited than in Dickerson (2004) and D’Souza (1995).

The neoconservative motif is that, unlike conservatives, they acknowledge that life chances are disproportionately distributed in favour of whites but then advance black pathology arguments to rationalise why blacks are lagging behind. In other words, while racism may be a problem, it cannot alone account adequately for black misery, depravation, and hopelessness. Dickerson, in particular, is scathing in her tirade of the African-American middle class whom she chastises because ‘their focus on racial grievances, however legitimate, keeps them from having to fashion a constructive way of viewing their role in American life’ (2004:10). As a way forward, she dares:

blacks to live as autonomous individuals with voluntary group identification, only by charting a course unconcerned with the existence of white people [and] only by taking responsibility for their comportment and decisions – only then will blacks be able to achieve collective goals, access collective penalties, award collective benefits, and jockey for socio-political positions like fully entitled citizens

She continues:

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<sup>22</sup> See, for example, Wattenberg (1974) and Wilson (1980).

No longer can standards of conduct and morality be lower for blacks than for whites: crime is crime, sloth is sloth, and merit is mostly measurable (2004:15).

While Dickerson's tirade straddles between black nationalism (given her call-to-arms exhortation to blacks) on the one hand and the neoconservative 'blame the victim thesis' which is also very much apparent, her repellent tenor (seemingly directed at blacks) does unwittingly pose a rather self-defeating refutation. This only serves to confirm, even more firmly, the centrality of race and racism and the deeply embedded meanings of what it means to be black and the social consequences thereof.

There are a number of implicit assumptions in Dickerson's treatise. First, there is the idea that blacks involuntarily (through coercion by other blacks) assign themselves to the black group and thereby unfairly deny themselves their individual essences. Second, it is implicit in Dickerson's work that she rationalises meritocracy to be a scientific system that is somehow pregnant with incontrovertible truths as opposed to being a by-product of historical and social processes of a given sociality. On the first question, Dickerson conveniently eschews white aggressions which may serve as reminders to blacks (even those who may have heeded Dickerson's counsel that they need to wear their individual identity tags and not those of the group) that they are indeed black and their blackness has a certain kind of essence about it. So group belonging is hardly ever only a question of black-on-black coercion, as Dickerson implies. On meritocracy, opponents charged that '[meritocratic] success is a function of particular knacks, some socially desirable (being 'smart'), and some not (sucking up) – and of nothing more grandiose' (Kennedy, 1995:159).

While the majority of blacks in the United States and in South Africa are arguably racialised 'others', given the history of bigotry and systemic (institutionalised) white racism spanning dozens of decades and centuries in both countries, it is a perfectly legitimate question to ask if such blacks therefore, as products of racialised social and historical processes, can successfully claim to see no colour. Conversely, can blacks be legitimately accused of racism (more so, against their erstwhile white political captors and oppressors)? That is, are blacks capable of racism? 'Black racism', declares Dickerson, 'while largely masturbatory because largely powerless, is equally ignoble, sinful, and simian' (2004:54). Here Dickerson rationalises and thus attempts to tranquilise white racism by invoking a phenomenon, which, while not omnipresent (to the extent that white racism is), may, in the foreseeable future, be a

potent plague with likely the same venomous bites as white racism has been, and continues to be. Also, there is one important requirement in weighing 'black racism'. Sponsors of such an argument do not only have to prove the transfer of power and influence from whites to blacks, but also they have to convince their audience that there is a particular understanding and acquiescence to the ideology of black supremacy and is institutionalised, and therefore is part of everyday reality and common sense in much the same way as it is generally the case with white supremacy. A more discerning mind would, instead, note the converse.

In demonstrating a black propensity to racism, Dickerson (2004:54) presents, as evidence, for example, that 'the American born slaves [was scornful of the] African born slave, while light skinned and house slaves despised the dark field hands'. While this researcher concedes that there may be social hierarchies within the black communities, it would be too implausible an argument to mount that such social hierarchies and their attendant prejudices are tantamount to racism. For instance, one cannot imagine that light-skinned blacks that see darker-skinned blacks as their inferior have a different kind of racial consciousness. In other words, it is almost near impossible to imagine that both the light-skinned 'house' Negro and his supposedly darker corn-field inferior would have conceived each others' identity outside the contours of blackness. That is to say, they both still saw each other as blacks. The house Negro would in no way have imagined the identity of his cornfield brethren as anything than black. Thus, the resultant charges of black racism seem overly extravagant given the gaping holes in Dickerson's logic.

Unlike Dickerson, conservative American scholar Dinesh D'Souza painstakingly chronicles white hate groups and their bigotry and then draws parallels with black hate groups (such as, for example, the Black Panthers in the United States) and black bigotry. In supposedly proving that black bigotry has as much effect as white bigotry, D'Souza (1995) then presupposes this as evidential proof that blacks too can be racist. However, D'Souza errs in that he elects to imagine blacks and whites in the same terms as though they were part of the same social and historical processes. In this instance, he may be presumed guilty of being ahistorical and acontextual by electing to ignore the varied social contexts underpinning life experiences of blacks and whites in a race-centred society over many historical periods of



their coexistence. Surely, for a white person in South Africa to hurl the word ‘kaffir’<sup>24</sup> at a black person would carry negative connotations and thus be tantamount to reminders of apartheid racial hierarchies. Similarly, for a white person in the US to be affixed derogatory ascriptions such as a ‘honky’ by a black person need not qualify as automatic evidential proof of racism against the white body, since such utterances, in all likelihood, do not emanate out of a particular sense of black racial superiority but, rather, as a response to the seething white racism and its continued dictates on the opportunities on offer to blacks. Thus, while white racism is a means to an end (the end being keeping the status quo that privileges whiteness), so-called black bigotry is, in all probability, an end in itself. That is, beyond the mere expression of bigotry (white hate), there is virtually nowhere else to go.

In summation, the notion of ‘no colour’ emanates from a particular stand of the neoconservative school that seeks to eschew, if not to obliterate, the significance of race as a key marker of difference which, in the American context (as is in that of South Africa) continues to shape relations of power between black and white. The neo-conservative view on race entailed in non-racialism (or so-called ‘colour-blindness’) has been much touted here in South Africa by most in the white section of society since the dawn of the new democratic era post-apartheid. The ideology of colour-blindness has attracted more critics than adherents. As Bonilla-Silva and David (2001), as well as Bonilla-Silva (2001) argue, white racial views in the post-civil rights era have acquiesced to the ‘colour-blind’ racial discourse which enables justifications as to why the status quo should be maintained. Some American scholars (Jackman, 1994; Bobo, Kluegel and Smith, 1997; Federico, 2000, cited in Bonilla-Silva and Embrick 2001) contend that whites, under the rubric of ‘colour-blindness’ have developed a new racial ideology that could be described as ‘muted hostility’, laissez faire racism or social dominance. (Donna, 1997 cited in O’ Brien, 2000:47) in concert with Bonilla-Silva (2001), makes an interesting case of what she calls ‘hidden ethnicity’, in making the point how a ‘white colour-blind view of self perpetrates racism, not only by masking dominant group interests, but also by delegitimizing how [black] people experience race’ (Donna, 1997 cited in O’ Brien, 2000:43). Ruth Frankenberg (1993) also took issue with white ‘colour-blindness’ by arguing that this colour and power evasive discourse is being used to avoid confronting the reality of racial inequality. Through the injection of laissez faire neo-liberalism, existing inequalities premised on race are made invisible with lack of individual effort as the only

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<sup>24</sup> ‘Kaffir’ is a derogatory word used during the apartheid era in reference to blacks. Its United States equivalent is the denigrating reference of blacks by whites as Niggers.

reason the marginalised are lagging behind the rest. Colour-blind claims are, however, not an exclusive competence of dominant privileged whites, blacks too do tend to also see no colour, as evidenced by the third narrative on black registrars. Like Bonilla-Silva's Latinos, some black registrars professed to see no colour through employing the white racial frame in self critique.

#### ***2.3.4 Whites in White Spaces: the Social Act of Seeing no Colour***

The concept of 'colour-blindness' or non-racialism is important in this thesis if we are to understand how both black and white staff, and the registrars see, and use race, and the social meanings and significance they accord to race. In attempting to understand white and black attitude to non-racialism and/or colour-blindness, it might perhaps be prudent to look at the historicity of the concept(s). In her study on the white racial identity in post-apartheid South Africa, Melanie Walker (2005) highlights colour-blindness as an overarching frame that whites employ in rationalising the status quo that disproportionately advantages them. The following is an excerpt of an interview of one of her white respondents:

It irritates me a bit, it really irritates me and it irritates a lot of students actually. We had a big discussion about this in class last week how people are still harping on this whole apartheid and discrimination thing, when we are already moving on, we are getting over it and let's carry on. But so many people are still harping on it.

Then consider the following excerpt from an interview of a white female associate professor in this research:

[When asked to generally comment in terms of black – white social interaction in the department, with a great sigh that could only have marked irritation at the question she protested] – I don't have glasses that tell me what the colour of the next person is. I never have. It's always been for me a non-issue. I am Jewish but I can't say all my friends are Jewish. In fact, I never ever make that expression [that I am Jewish]. It irritates me because that's nonsense. My friends are my friends. It does not matter what their religion is. It does not matter what their colour is. It does not matter what their culture is ... I actually don't care where they come from.

Again here, the four frames of colour-blindness from Bonilla-Silva (2001) will be employed in offering descriptive analysis of South African whiteness and the new racial ideology of 'seeing no colour'. In short, Bonilla-Silva demonstrates that whites readily employ the new

racial ideology of colour-blindness (as though to minimise the effect racism had, and continues to have, on blacks as a subordinated group). Also, the colour-blind frame of abstract liberalism (the idea that the new constitutional democracy guarantees equal rights and life opportunities to both blacks and whites evenly) seemed most appealing, and commonsensical to white respondents. Most previous studies<sup>25</sup> on whiteness confirm the white complicity to perpetuation of the unequal status through one or more of the frames suggested by Bonilla-Silva.

#### **2.4 Situating Non-Racialism and ‘Colour-Blindness’ in South Africa**

The African National Congress (ANC) is by far the most influential force in black politics since its advent in 1912 and has thus arguably shaped South Africa’s socio-political thought in the many years of its existence. Interestingly, black political discourse in the early 20<sup>th</sup> century had paid scant attention, if at all, to the ideal of non-racialism. The more appealing canvassing ideal in the early 20<sup>th</sup> century, it appears, was that of African nationalism.<sup>26</sup> This, by extension, excluded people of other races, most notably those designated as Coloureds, and then Indians.<sup>27</sup> It also excluded whites who might have been sympathetic to the cause of African liberation. The idea of a non-racial society was only given real impetus at the Congress of the People in Kliptown, where people of all races gathered and what became to be known as the Freedom Charter was adopted. The preamble declared unequivocally that:

South Africa belongs to all who live in it, black and white, and that no government can justly claim authority unless it is based on the will of the people. Only a democratic state, based on the will of the people can secure to all; their birthright without distinction of colour, race, sex or belief (Congress of the People, 1955).

The chasm between blacks (as an oppressed racial group) and whites (as the oppressive ruling class) was forever present in South African society, and more so, even in the ANC, so much

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<sup>25</sup> See, for example, Steyn (2001) in her investigation into mutating white identity in post-apartheid South Africa and Essed’s 1992 magnum opus on how white women work with race. See also Walker (2005).

<sup>26</sup> African nationalism, as explained in the ANC Youth League Basic Policy Document (1948) espoused an idea excluding whites) as one monolithic entity that could champion the course of their own liberation against oppressive white rule.

<sup>27</sup> In Nelson Mandela’s autobiography, *Long Walk to Freedom*, a revelation is made about Mandela’s ambivalence and open opposition to the participation of Indians and Coloureds in the Defiance Campaign is revealed.. Mandela also makes no secret about how he loathed the predominantly white Communist Party of South Africa’s involvement in the politics of the ANC. The threat of white influence to a cause which was in the main for Africans worried the young Mandela of the ANC Youth League.

so that a splinter group of so-called Africanists, opposed to the idea of non-racialism would sever ties with the ANC and formed a new political force in the Pan Africanist Congress (PAC).<sup>28</sup> However, in decades to come, the wishes expressed in the Freedom Charter were to finally find expression in South Africa's negotiated Constitution of 1996, which gave effect, to a minimum extent, to the ideal of non-racialism. In this respect, Section 9(3) is the most authoritative as it states that:

The state may not unfairly discriminate directly or indirectly against anyone on one or more grounds, including race (Constitution of South Africa, 1996).

What then is non-racialism, and how should it be understood in the context of competing interests in South African society in general, and within the academy in particular? Given the legacy of past discrimination, remnants of which are still experienced currently, is it possible that both black and white persons in the same locale can share the same ideal of non-racialism? Put differently, can the ideal of non-racialism in the academy be viewed with the same prism by both black and white persons? While many whites may very readily claim not to know colour,<sup>29</sup> can blacks, whose life experiences have been directly or indirectly, shaped by race realistically claim not to see race (or colour)? In other words, could a black person as a member of a previously oppressed group claim to be colour-blind? Similarly, could whites who consciously or unconsciously thrive on the felt sense of security and privilege that whiteness confers claim to see no colour? The researcher asks these questions as they are relevant in the context of a higher education 'field' inhabited by both blacks and whites as they could, in the research, offer clues about the dynamics of black and white social contact in the academy, as will be seen from the interview data.

How then can one evaluate, and what mechanisms can a theorist employ, in disentangling and weighing up color-blindness? In the context of this research, the notion of colour-blindness and its manifestations are important as they speak to the very core of university's ideals and values – one that is purported to be ideology and value free, and one that prides itself of a

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<sup>28</sup> Mandela (1994) in his autobiography gives a full account of the PAC's decision to break away from the Congress Movement, the African National Congress (ANC). At the heart of it all was the discomfort about embracing 'non-racialism' as opposed to declaring that South Africa belonged principally to black Africans. Closely related to the anti non-racialism rhetoric, the Africanist wing of the ANC which became the PAC was uncomfortable with the accommodation of the Communist Party of South Africa into the politics and operations of the Congress Movement.

<sup>29</sup> See, for example, Walker, 2005.

strong ‘liberal tradition’, which appears to have been, nonetheless, paradoxical. The university’s record as a defender of academic freedom was blemished by its simultaneous capitulation and complicity to discriminatory laws under the Extension of University Education Act of 1956. The so-called Mafeje<sup>30</sup> affair epitomises the University’s role in acquiescing to apartheid policy, when the University seemingly under pressure from the apartheid security branch, withdrew an offer of a senior lectureship to a very qualified and able scholar in the person of Archie Mafeje. While it could be argued that, perhaps, apartheid pressure may have been too much to bear on the side of the University, there was little effort in the new dispensation post-apartheid to secure the services of Professor Mafeje – then an accomplished researcher and scholar in his own right.<sup>31</sup> The point the researcher seeks to make is to point out the dissimilarities between non-racialism, on the one hand, and anti-racism, on the other, and in the case of Mafeje and many similar other cases, the University, though it espoused and exhibited a non-racial posture, could certainly not have been anti-racist, for, as O’ Brien argues, in trying to decode anti-racism and non-racialism:

Non-racists merely process racially tolerant attitude and think everyone should be treated equally, white antiracists not only acknowledge that everyone should be treated equally, but are working to do something about that’ (O’ Brien, 2000:42).

One of the most useful conceptual frames, and perhaps in tune with the racialised South African social structure in view of its post-apartheid migration towards colour-blindness, is the four-tier frame posited by Bonilla-Silva (2001:142) in his study of colour-blindness among black and white residents of Detroit in the United States. This researcher deems the posited conceptual frame that decodes colour-blindness as being critical to the study as it broadly complements the overarching theoretical framework of CRT. In particular, the four-tier frame is conceptually useful as it specifically speaks to narrative three on black registrars (Chapter 6, part three) and the white grand narrative (Chapter 7). The frame is explained in some detail below.

#### ***2.4.1 Abstract Liberalism***

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<sup>30</sup> Professor Archie Mafeje has had a distinguished academic career, after being rejected tenure at his alma mater, the University of Cape. He has held academic postings at several institutions across the globe including Cambridge University at which he received his PhD, the University of Dar es Salaam, American University in Cairo, the Institute of Social Justice in The Hague and Northwestern University in Chicago.

<sup>31</sup> See, <http://www.uct.ac.za/about/management/vc/installation/mafeje>. [Online].

The abstract racial discourse encapsulates, among others, the de-contextualised use of economic (*laissez faire*) and political (equal opportunity) principles of liberalism to justify the status quo. Perennial anti-equity policies (anti-affirmation action) at places of higher learning, ostensibly in favour of ‘merit alone’ are the most obvious of examples under this frame.

#### ***2.4.2 Biologisation of Culture***

Through this frame, black plight is interpreted as the product of cultural deficiencies – those deficiencies that are supposedly inherent in blackness, for example, the ‘laziness of laziness’, ‘blacks less committed’, ‘blacks unintelligent’. Here the protagonists are resolute on blaming the victims of racial oppression and easily reducing black depravation to scientific determinism – a particular understanding that pejorative attributes inhere in blacks account of some ‘natural’ anatomical makeup from which all persons of the white stock are immunized. However, when blacks too begin to internalize and believe in this, it is referred to as internalized oppression which, at worst, as Bourdieu (1990:130) would have insisted, ‘reproduce the structure of relations of dominance and dependence’. This is symbolic violence – self-inflicted domination that is often misrecognised because it tends to be normalised, and thus part of acceptable public discourse and social practice, sponsored mainly by victims of racial oppression themselves.

#### ***2.4.3 Naturalisation of Racial Matters***

Here, the tendency will be to take the choices and actions of people as natural – e.g. it is a natural choice that one goes to an all-white school, or to an all-black school. That is, race has got nothing to do with it. Rather, it is in human nature that we make the kind of choices we make. That we tend to court each other and coalesce around those whom we are most comfortable with, because we speak the same language, hail from the same geographical area, and look very much alike. Overtly problematic here, of course, is that the protagonists elect to play ignorance to a particular socio-historical context within which such decision making processes occur, for it may not be purely by accident, for example, that whites tended to go to all-white schools as well as live in all-white residential areas. History and socio-historiography of being white in South Africa accounts much for the kind of choices whites make, and continue to make post-apartheid.

#### ***2.4.4 Minimisation of Racism***

This is perhaps the most common frame that adherents of colour-blindness use –the common phrase goes something like this, ‘it does not matter to me whether somebody is black, green, yellow or purple’. Sometimes, the colour-blind faithful would invoke satire to shrug off (or blur) the weight of racism.<sup>32</sup> By not naming (or misnaming) race, unequal relations of power premised on race remain intact. By belittling experiences people have as a consequence of their race is also meant to deny them a discourse – in other words, it is effectively a means to silence them - for what they say, think, believe and perceive is not in accord with the norm, that is, with how the dominant see the world.

There is a plethora of literature to support Bonilla-Silva’s four-tier typology of colour-blindness, including the respected race theorist Ruth Frankenberg (1993), Fred Pincus (2000) and Melanie Walker (2005). In line with Bonilla-Silva’s typology, Frankenberg (1993) posits what she calls three white racial discourses, (a) race-cognisant discourses, (b) colour and power evasive discourses, and (c) essentialist race discourses. Race cognisant discourse is analogous to Eileen O’ Brien’s description of white anti-racists. Colour and power evasive discourse speaks directly at colour-blindness and the minimization of racism. Feminist researcher and scholar Philomena Essed (1991:40) counseled thus on the dichotomous relationship between power and racism:

The consciously or unconsciously felt security of belonging to the group in power, plus the expectation the other group members [the subservient other] will give consent, empowers individual members of the dominant group in their acts or beliefs against the dominated group.

Here, Essed demonstrated that racism is implicated in power and to the extent that the uneven distribution of power across key strands of national life is premised on race, with whites usually in power strangleholds, racism would continue being a dominant feature of modern society, irrespective of the vain attempts by the most powerful to musk it.

## **2.5 Racism Decoded**

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<sup>32</sup> See for example, the electronic altercation between Professor David Benatar of the Department of Philosophy at the University of Cape Town (UCT) and Drs Sam Raditlhalo and Natasha Distiller of the English Language & Literature Department at UCT- <http://www.uct.ac.za/mondaypaper/archives/?id=5349> [Online].

With the idea of race, of course, came, racism. Racists believe that the human family is divided into stable racial categories of superior and inferior kinds from birth (Harris, 1999). Therefore, for racists, the idea of 'race' is an observable scientific truth – it is what exists in reality. For racists, argued Harris (1999:18) 'what is real exists objectively, that is, independently of social ideas'. A racialised ideology, as argued in Fredrickson (1971:2), 'was grounded in what were thought to be facts of nature'. Environmentalism and culture were also prominent in Europe during the Enlightenment period as apparatus to explain human difference. In her account of the ideology of racism, Brattain (2007:1386) suggests that the 'ideology behind racism, when explicitly expressed, most frequently took the form of 'white' beliefs about the innate inferiority of people of African descent'. In that respect, the black and white binary has been the most obvious social utility (or apparatus) through which black and white races in South Africa related. In this thesis, two 'racial groups' designated under apartheid as 'Black' and 'White' are the subject of the study. For the purpose of this research, Duncan et al. (2001:2) as cited in Raditlhalo (2007:5), made a more appropriate articulation of racism when he defined it as:

An ideology through which the domination or marginalization of certain racialised groups by another racialised group or groups is enacted and legitimated. It is a set of ideas, discursive, and material practices aimed at (re)producing and justifying systematic inequalities between racialised groups.

The foremost important aspect of racism is not the intense dislike and being prejudicial against the racialised 'other'. Rather, race should be seen more as being implicated in power (Essed, 1995). Power is, in turn, defined by Wrong (1979:2) as 'the capacity of some persons to produce intended and unforeseen effects on others'. As Essed (1995:40) argued, power is important in the context of groups (races) since power rarely resides within individuals but instead is a property of the group. It is this perspective that enables us to look at relations of power between black and white individuals as part of a broader social system that celebrates and reveres whiteness while it abhors and denigrates blackness. Social conditions dictate the nature and form of racism as well as its manifestations. As has been demonstrated in earlier parts of the literature, racism in the post-apartheid period has found new modes of self-expression. No longer is it as overt, vile, and in-your-face, as it was during colonialism and then, later, during apartheid. Instead, racism has found expression in more subtle ways, at best often unrecognized, and at worst seeming innocuous, hence the preponderance of the



new racial frame of 'colour-blindness', which, as has been argued, can be interpreted as a new form of racism as it works principally towards the maintenance of the status quo.

## **2.6 'At Home' and 'Not at Home': the Politics of Place in Hegemonic Milieus**

Feeling 'at home' or not is depended on one's sense of habitus at a given place. However, before an attempt is made to disentangle conceptual construction of habitus, the whole idea of 'at home' itself needs some reappraisal. Although Thaver (2006) investigated the conceptual complex of 'home' from the particular vantage point of institutional culture, his formulary of this conceptual complex is still useful as it extricates it from the usually unproblematised and romanticised social platform. In that respect, while he acknowledges the traditional social construction of 'home' as a place of enchantment, i.e. a place of safety, growth, nurture, and affirmation, he recognises simultaneously the inherent contradictions by articulating 'home' as a place of disenchantment. Borrowing from George (1999) seminal work on the duality of the concept 'home', Thaver (2006:19) avers that:

Home is itself pregnant with contradictions and contestations. On the one hand, we have the power dynamic in patriarchal, [racist], and gendered self-identity, and on the other hand, we have the idealisations of home in comfort, nurture, and protection.

'At home', therefore, speaks to a sense of place i.e. habitus, itself defined by Bourdieu (1990:52) as 'systems of durable, transposable dispositions'. Habitus is thus 'a sense of one's (and others') place and role in the [social] world' (Hiller and Rooksby, 2002:5). Therefore, in this research, as the black registrars' sense of place, i.e. their feeling 'at home' is foregrounded, this will be examined from the standpoint of structural factors within the University of Cape Town's Faculty of Health Sciences and the broader university environment that is predominantly white, bearing in mind the socio-historicity and the fact that, habitus is, in itself, a product of history.

In expounding on the social construction of home, and social dynamics that determine whether people feel 'at home' or not 'at home'. Said (1983), as cited in Thaver (2006:18), made the poignant point that

There is a distinction between the place as home or its physicality, and the social relations that ensue within this space such that it produces that state of being 'at home'.

In this research, therefore, the social construction of home recognises its duality as contemplated in Thaver (2006). This inherent contradiction and duality of 'home' is also expounded further in McKibbin (2008) who looks at the possibilities of 'home' within a big sprawling city through a deeper analysis of main characters in Dionne Brand novel vis-à-vis their city social space. McKibbin (2008:502) is insistent that:

Ultimately, city spaces potentially offer home to each of them, but each must carve out his or her own space(s) within the city to make genuine claim of home. Beginning with a description of the city as an almost autonomous entity, the novel immediately draws attention to the city as a crucial figure bestowed with the particular force that will dominate the lives of the characters.

While structural factors play a role in determining one's sense of place, what McKibbin demonstrates (in her analysis of the novel characters vis-à-vis their own sense of place in the City of Toronto) is that structural factors notwithstanding, there is a particular role for human agency. That is, while a section of the University of Cape Town's Faculty of Health Sciences might be grossly disaffected, just as in Toronto, one's sense of place, or one's habitus, is subject to negotiation and as opposed to being wholly beholden to structural factors outside the locus of control of the individual. Following this logic therefore, black registrars' sense of place, while somewhat structurally determined, will be dependent on the extent to which they practically carve their own space within the Faculty and the broader university.

## CHAPTER THREE

### Evolution of South African Higher Education

#### 3.1 Introduction

Because it is necessary to understand the medical education landscape in South Africa within the framework of this research, this chapter chronicles some of the defining moments of its higher education system in general, and the University of Cape Town's approach in particular, with a specific focus on the University's medical school. While racism in higher education reached its peak during apartheid, the chapter argues that colonialism provided the foundation that propped up apartheid racial thinking. In other words, at the risk of overstating the obvious, racism in higher education did not emerge with the advent of apartheid in 1948. South African society was already racially regimented at this time, although racial segregation as a formal programme of government had not as yet been institutionalised. As it will be demonstrated, here too, the whims of industrialisation did not only presuppose crass capitalism, but one that was laced with race, with higher education institutions guaranteeing to the white industrial moguls that they would ensure a reliable supply to them of skilled labour of the right colour. The chapter therefore helps to demonstrate that race and racism have historically permeated every aspect of South African life, and that higher education institutions, in particular the predominantly white medical schools, were not immune to this racialising project. Overall, the chronicling of the evolution of higher education in the various historical phases posited need not suggest the presentation of a coherent historical grand narrative for its own sake. Rather, the history is laid out, in some instances in much detail, so as to demonstrate that the current racialised higher education landscape owes much of its being to socio-historical processes, of which race was a key determining part.

#### 3.2 South African Higher Education: History at a Glance<sup>33</sup>

In this chapter, the researcher does not seek to give a detailed grand narrative of the evolution of the sector. Rather, the purpose of the section is to highlight some of the salient features in its development throughout the various historical periods. To that end, this author will suggest that there are three periods that remain pivotal in the development of the South African modern academy; and those are (i) colonialism, (ii) industrialisation and (iii) apartheid.

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<sup>33</sup> The earlier research of scholars on the history of South African higher education has been most valuable in the formulation of this section. Most of the historical accounts referred to have been extracted from Cilliers (1944); Phillips (1993); Murray (1997); Seepe and Makgoba (2000); Currey (1970); Cloete et al. (2002) and Cooper and Subotzky (2001).

### ***3.2.1 Higher Education under Colonialism (1829 – 1948)***

The earliest trace of an institution of higher learning is to be found only in the early 19<sup>th</sup> century, with the establishment of the South African College in 1829 for white boys of middle-class backgrounds. Out of this college was to emerge the University of the Cape of Good Hope (UCGH) in 1873, itself an external-examining and degree-granting institution, along the lines of the University of London model (Subotzky, 2003; Cooper and Subotzky, 2001). Under its aegis were to be several other newly formed university colleges.<sup>34</sup> At this stage, black access to higher education did not even merit discussion. In other words, the old racial hierarchical principles within a Eurocentric framework became the foundational basis on which the university sector was fashioned (Thaver, 2006). The University of Cape Town (UCT) emerged with a full university status in 1918 as a result of intense negotiations between General J.C. Smuts and the two British philanthropists, Sir Julius Wernher and Otto Beit who together contributed 500 000 pounds towards its establishment (Louw, 1969:69-70). They were business associates of the arch colonialist and the governor of the Cape Colonial Government, and Alfred Milner, who made a killing on the goldfields of the Reef in the Witwatersrand. The UCT Medical School has reciprocally erected a permanent memorial to these benefactors in naming one of its main buildings after Julius Wernher and Otto Beit (the Wernher and Beit Building). True to its British colonial roots, it was not by chance that UCT's first Chancellor was His Royal Highness the Prince of Wales. Also, members of the early medical faculty were either Scottish expatriates or had received their academic training in Scotland, most notably at Edinburgh (Mindel, 2003; Louw, 1969). According to Mindel (2003), in her treatise on the socio-historiography of medical training at the University of Cape Town's Medical School, the dominant bio-medical training curricula was configured along the same lines as that at the University of Edinburgh, with little attention paid to differences in the social contexts of both countries. Higher education researcher Beverly Thaver notes that the Scottish presence at the University extended also to its symbolism – and here, for example, she mentions the naming of two buildings after Scottish trained academics that had occupied senior executive positions at the University (2006:53). This observation is also made by Louw (1969) in his grand historical account of UCT's Medical School.

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<sup>34</sup> These included Rhodes University College in Grahamstown, Natal University College in Durban, Transvaal University College in Pretoria, the Grey University College of Bloemfontein, the Huguenot College (which was later disestablished), and the Johannesburg School of Mines. See also chapter 1 of Cooper and Subotzky (2001).

In the meantime, circumstances dictated that the University of the Cape of Good Hope's model parent (the University of London) be reconfigured. Along with new proposals, the University of London was reorganised, and became a teaching as well as an external-examining body, with its affiliated university colleges, including Bristol and Manchester becoming fully-fledged entities in their own right. This prompted, in South Africa, what was to be famously referred to as 'the university question'. This being: 'just what was to be done to the UCGH?' It was within this context that the University of Cape Town (as did Stellenbosch University and others) emerged, (Cooper and Subotzky, 2001).

In 1916 the Union government<sup>35</sup> passed an Act of Parliament paving the way for a new national university - the University of South Africa (UNISA). Several university colleges, which, hitherto, were under the academic trusteeship of the old UCGH, were then transferred to the new university. University status of the different constituent colleges was conferred only later, and at different times depending on the colleges' own level of development.

In addition to the University of South Africa (UNISA), the newly inaugurated Union government gave the South African College (SAC) its charter as the University of Cape Town [within which was incorporated the SAC] and Victoria College its charter as the University of Stellenbosch. Rhodes University College in Grahamstown, the Huguenot College in Wellington, the Natal University College, the Transvaal University College at Pretoria, the South African School of Mines and Technology at Johannesburg and the Grey College at Bloemfontein, were all lumped together to become constituent colleges of the newly formed University of South Africa (UNISA), headquartered in Pretoria.

In 1921, the School of Mines became the University of the Witwatersrand, Johannesburg and in the same year, Potchefstroom Theological School of the Dutch Reformed Church was incorporated as a constituent college of UNISA. In 1930, the old Transvaal University College was elevated to a higher status and thus became the University of Pretoria.

From 1916 up to the financial year 1923/24 the state used the so-called grants-in-aid based system of watertight expenditure controls. The state was embarking on a new experiment in

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<sup>35</sup> This was a pact – a university government that sought to bring harmony between the Boers and the British after the brutal war they fought against each other for territorial control. Historically, this war is known as the Anglo-Boer war of 1899–1902. Some historical texts refer to it as the South African War.

higher education and, depending on the time when the various institutes could show that they can manage their affairs financially, it was to keep a close watch on the purse strings, and direct its assistance along definite and specific channels. With time, however, some level of trust became apparent and oversight over the fledgling university sector was gradually relaxed.

It should be noted that the move towards conceptualising higher education and seeing this to fruition took over two centuries since the arrival of Dutch colonialist Jan Van Riebeeck and his entourage in 1652, and this might beg the question as to why this was so sluggish. There are two possible reasons why this may have been so. First, the Dutch settlers in the early years were still only looking at their newly found habitat as impermanent. In other words, in their imagination, the colonists had seen the Cape of Good Hope as nothing more than a refreshment station en route to the East (Paasche, 2006). Secondly, Europe had been a highly stratified society and was in the process of emerging out of the feudalism of the medieval period when the first settlers arrived at the Cape. During feudalism, education was strictly a private affair and was an exclusive preserve of the priesthood and the children of the nobility (Coban, 1975). Evidence suggests that very few of the white colonists that came to settle in the shores of the Cape of Good Hope were of noble lineage, thus it is quite possible that, given their lack of such upper class and aristocratic predispositions, their focus was on the immediate day-to-day pressing needs rather than being preoccupied with academic, vocational and professional training, with only a few among the settler aristocracy sending their children to universities in Europe.

There had, of course, been very little thought given in addressing black higher education at the time. If ever there were murmurings, these would have been, in all manner of speaking, paternalistic. If there were to be a black educational institution, officialdom took it upon itself in ensuring that, by design, it was never of equal status and standing relative to its white counterparts. The creation of a separate and unequal institution offers early glimpses of racialism in the sector (racialism, which of course, drew on race and racism). These would be discussed in some detail in the later sections of the chapter. On the legislative front, separate and unequal was nowhere more aptly expressed than in the Financial Relations Act of 1922 which defined the term 'higher education' as including 'training at university [white university] institutions and at certain technical institutes' and further added the qualification

that ‘the Native College at Fort Hare is in a class by itself, and should be separately considered’.

Until 1916 when the South African Native College (SANC) at Alice in the Eastern Cape first opened its doors to blacks, higher education for this sector of the population had been something of a novelty. While the College was born out a joint effort between the Christian missionaries and the colonial authorities ‘to educate the native’, its intentions, however, were far from noble. Rather, from its very conception, the College was born out of a desire by both colluding European groupings (the British and the Dutch), to ‘civilise the native’ in their own image. It was assumed that by educating them, and stripping them of their ‘otherness’, their ‘heart of darkness’ (to borrow Joseph Conrad’s analogy from his classic, *The heart of darkness*), the native might, over time, become more submissive,<sup>36</sup> and thus more accepting of his naturally inferior status in the South African social stratum. At best, however, this was to elevate them to a level slightly higher than most of their own kind who had not had the privilege of a post- secondary education. As Derrick Swartz, the then Vice-Chancellor of the University of Fort Hare (the ultimate successor of the SANC) put it:

its founders saw its role as preparing a small black elite to serve in the colonial state and civil administration. The range of academic programmes and career paths was restricted to teaching education, Christian theology, and classical studies. It was assumed that after completion, graduates would go into the teaching and religious institutions of colonial South Africa. The narrow paternalism of ‘native [black] education stood in contrast to white designated universities...where members of the dominant elite assume leadership in the state, economy, and civil society, were to be educated (Swartz,2006:149).

The SANC’s peripherality was to be further confirmed when it was denied full university college status as a constituent college of the newly formed UNISA, under whose aegis operated a number of white constituent university colleges. This is perhaps one of the most interesting paradoxes of the time. On the one hand, a white colonial government, in collaboration with the Christian missionaries, established an institution dedicated to the tuition of blacks, while, on the other, being anxious of a native college that may pose

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<sup>36</sup> See, for example, specific accounts of D.D.T Jabavu at the South African Native College (the forerunner of the University of Fort Hare) in Higgs (1997).

competition to whiteness, it denied the black college the same opportunities as white universities. Of course, as history would have it, this black college became a bustling initiation site of Black Nationalism – an ideology that significantly shaped the nature of opposition politics in subsequent years (Swartz, 2006:149).

The SANC was finally granted its status as an autonomous standalone institution in 1959 (and renamed the University of Fort Hare) with the passing of the notorious Extension of University Education Act. This period was to prove quite crucial, as it was during this period that the apartheid state promulgated its formal policy of separate development, a programme that was to be both racist and racist. The later sections of the paper will offer, in some detail, a descriptive account of the higher education landscape under apartheid.

### ***3.2.2 Higher Education and the Industrialisation Project (1900s – 1948)***

One of the most understated catalysts of the South African higher education sector has been industrialisation, (Cooper and Subotzky, 2001). This was precipitated by the sudden growth of primary industries, led by the precious mineral rush in the Witwatersrand area, the Reef, and Kimberley. Further, this revolution made it possible for secondary industries to mushroom, partially in manufacturing, meaning that the burgeoning economy was to place a premium on new sets of skills, forms of knowledge, and expertise, and there existed no better place where talent was to be reared than in the university itself. For example, the technical colleges and the Johannesburg School of Mines (later to be known as the University of the Witwatersrand, Johannesburg) played a crucial role in this respect from around the 1900s. The role of South African universities in the political economy was even more pronounced during the Second World War, owing to the booming secondary economy that was in dire need of skilled personnel, for the war effort needed material, chemical, and nautical experts, among others (Murray, 2002). Most importantly, however, those who were to be educated for industry, political economy, and civic duty, had to be white, and the white universities took it as their mandate that they do so in this early industrialisation period. An educated black elite was, through the white gaze, undesirable. Rather, cheap black labour was both a necessary and sufficient condition for industrialisation, given its experimental and embryonic phase. It was particularly during this period then that ‘South African capitalism [as was its university] became imbued with racism’ (MacDonald, 2006:50).

### ***3.2.3 Higher Education under Apartheid***



Since school education was racially stratified <sup>37</sup> under apartheid, in like manner, the higher education sector was designed to resemble the same racial regimentation with the result that apartheid-type social relations of white domination and black subordination were entrenched and maintained (Thaver, 2006). As already intimated in the earlier sections of this chapter, it would be erroneous to create the impression that a racist and segregationist higher education sector began with the advent of apartheid in 1948. This is not to deny, however, that some modicum of truth may exist in this claim, only because it was during this period that a racially segregated university sector was officially institutionalised through a formal government policy than had been the case before 1948. It all became possible with the National Party defeating the United Party of Jan Christian Smuts in the 1948 whites-only poll. After 1948, the apartheid regime was highly successful in developing a university system that is divided by race, both between institutions, and within each institution (Reddy, 2004). The ruling National Party felt that its predecessors did not go far enough in entrenching segregation in all strands of the South African society and, to the extent that they believed this was the case, they were hellbent at making segregation an ingrained part of day-to-day life in South Africa. Just like many other institutions of society at the time, universities were thence to be overtly 'raced'. Thus, observed Thaver (2006), 'race' based policies were reflected, among other things, in the academic staff profiles across the four racial clusters,<sup>38</sup> with a preponderance of white academics in all universities (including for the first few decades a heavy concentration of whites even within the historically black universities themselves). To date, the picture has not changed much, particularly in the case of academic staff at most of the historically white universities, as illustrated in Gibbon and Kabaki (2002:200). The black academic headcount within the historically white universities remains as negligible as it was during the periods of official segregation.

There is seemingly an inextricable link between two historical events in the post-1948 period, given the cosmetic<sup>39</sup> shifts on the political front. First is the promulgation, by Parliament, of the Extension of University Education Act of 1959, and second, the balkanisation of South

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<sup>37</sup> The Department of Education and Training, which controlled the departments of education in the homelands [education for blacks], House of Assembly [for whites], House of Representatives [for Coloureds] and the House of Delegates [for Indians].

<sup>38</sup> During the days of the old population register, the state sought to rank 'races'. In that ranking, whites came first, followed by Indians, then Coloureds. Blacks (Africans), according to the population register were relegated to the lower rank i.e. the lowest in the South African social stratum.

<sup>39</sup> The researcher here seeks to characterise the nature of South Africa's transition from racist apartheid rule to multi-party constitutional democracy as cosmetic since it did not signal, in any fundamental way, a clean break from the past. Past inequities premised on race still linger on, even in the post-apartheid period.

Africa's hinterland that saw the introduction of the much loathed 'homeland system'. With this new political arrangement, government sought to divide the rural barren countryside along ethno-linguistic lines. Such balkanisation was to instill in the black psyche an idea that they had, indeed, found some level of freedom and (perhaps with time) would rescind calls in opposition to the white minority government. The homeland system, it could be argued, had a distinct political agenda. There were, in total, seven such 'homelands', namely, Qwaqwa (for South Sotho speaking people), Gazankulu (for the Tsonga), Lebowa (for the Pedi), KwaZulu (for the Zulus), KwaNdebele (for the Ndebele), KaNgwane (for the Swazi). The homeland system was further extended to include what the apartheid government referred to 'independent states' (abbreviated as TBVC states). These were Transkei (for one faction of the Xhosa), Bophuthatswana (for the Tswana), Venda (for the Venda) and Ciskei (for another faction of the Xhosa). The TBVC states were elevated to the status of 'statehood' while lacking legitimacy and infrastructure to befit such standing. The homeland universities were created to meet these racial and ethno-linguistic maxims of the apartheid regime as they were envisaged, in the white imagination, to breed a more pliable black middle class. With the creation of a so-called black middle class, or *petit bourgeoisie*, the apartheid regime thought it was assured of a buffer zone, and there could not have been a better vehicle through which this small class of *petit bourgeoisie* was to be taught, socialised, and reared in the 'ways of the white ruling class' than in the homeland universities themselves. The black middle class, denotes not so much a professional class of, say, engineers, accountants and doctors, but rather, those occupations in the middle and lower rungs such as teaching, social work, the priesthood, and civil servants manning the homeland administrations. This rearing of blacks in the manner and spirit commensurable with that of apartheid planning was possible, given that the vast majority of the teaching staff within the homeland universities initially came from within the ranks of the white ruling Afrikaner<sup>40</sup> class. However, by the 1980s, the trend had almost been reversed, with more blacks joining the ranks of academia in the homeland universities.

Upon its promulgation, the Extension of University Education Act paved way for a new breed of universities. From within the South African Native College was to be created the University of Fort Hare in 1959 (for Xhosas), University College of the North in 1960 (for the Sotho, Venda, and Tsonga), while the University College of Zululand in 1960 was created

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<sup>40</sup> Afrikaners are descendents of the early Dutch settlers who came to colonize South Africa. Within this group however, there are those of French-Huguenot and German heritage.

to serve the Zulu. The Coloured population was provided with the University of the Western Cape (UWC), 15 kilometers outside central Cape Town. The Indian population was given the University College Durban Westville (UDW), situated just outside of Durban. Durban-Westville and UWC served to produce an Indian and a Coloured middle class respectively. Infused within these institutions was an identity of marginalised, ethnic-based entities, with no standing in the higher education mainstream. Historically, black institutions were to suffer in particularly notable respects:

- Inferior infrastructure and resources;
- Rural or quasi-rural placement [Except UWC and the University of Durban-Westville (UDW)];
- Curtailment of academic freedom;
- Lack of organic links to government and industry; and
- An overwhelmingly undergraduate orientation

(FitzGerald, 2006:111).

Besides the six ethnically-based self-governing territories (or homelands) on whose land black universities were established, the apartheid political landscape made provision for four so-called independent states<sup>41</sup> within which three new universities were to be located. It is from within these 'independent states' that there emerged the University of Bophuthatswana (for the Tswanas), University of Venda (for the Venda people), and the University of Transkei (for the Xhosas). Ironically, some of these territories became key strategic sites from where an offensive against the apartheid state was to be planned and executed, and in that respect, the Transkei<sup>42</sup> deserves a special mention.

With reference to the University of Cape Town (as it may be so with any other university under apartheid) it would be erroneous to presuppose that race and racism became the hallmarks of the University only at the advent of apartheid in 1948 and upon promulgation of

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<sup>41</sup> A descriptive account of higher education landscape is captured in Bunting (2002). The four independent states were Transkei (for one faction of the Xhosas), Ciskei (for another faction of the Xhosas), Venda (for the Venda people) and Bophuthatswana (for the Tswana).

<sup>42</sup> See, for example, *Long walk to freedom* (1993). Here, Nelson Mandela details the importance of South Africa's balkanised hinterlands as strategic locations from which an offensive was launched against the then white minority government. The Transkei, in which Mandela was born, was a prime example. This was about the same time as some of the black areas got technikons, see, for example, chapter 1 of Cooper and Subotzky (2001).

the Extension of University Education Act in 1959. Since its inception in 1829 as the South African College, the University of Cape Town had hardly escaped South Africa's racialising project during the colonial years. Because it was officially declared a white university (as was its counterpart the University of the Witwatersrand in Johannesburg), the University of Cape Town was barred by the Act from admitting students of other race groups (Thaver, 2006). Students other than white wishing to enroll at the University could only do so upon seeking and being granted a ministerial permit.

### ***3.2.4 The Evolution of Higher Education Policy in Post-Apartheid South Africa***

The dawn of the new era, epitomised by the release of Nelson Mandela from a long incarceration in February 1990 and the non-racial general election in April 1994, precipitated major policy shifts in many spheres of national life, and not least, in the higher education sphere. Perhaps a catalyst (as this new long journey began) was the establishment of the National Commission on Higher Education (NCHE), an initiative of President Nelson Mandela in 1996. The Commission's brief was to provide a new higher education policy framework. This framework was to shape the direction of future higher education policy in South Africa. Predating the NCHE report was the ANC's Education Department's policy document entitled *A policy framework for education and training*. At the time, it described the higher education landscape as:

The education and training system under apartheid has been characterised by three key features: First, the system is fragmented along racial and ethnic lines, and has been saturated with the racial ideology and educational doctrines of apartheid. Second, there is lack of access or unequal access to education and training at all levels of the system. Vast disparities exist between black and white (ANC 1994, cited in NCHE Report, 1996).

The NCHE Report laid out framework for transformation of the higher education sector in the post-apartheid period. Among others, it:

- Suggested that there be a single coordinated system of higher education that shall encompass universities, technikons, and colleges. Accordingly, it called for single coherent national qualifications framework within which formal academic programs will be offered;

- Expanded access, while being mindful of the limitations scarcity of resources place on the new drive to increase participation, especially to those sections of the population to whom higher education had been a novelty;
- Stressed the fundamental importance of research within higher education and its vital contribution to a national system of innovation. It needed to be noted that historically black universities were considerably deficient on research and innovation front, and this signaled a targeted focus on their outputs as the transformation project gathered speed;
- Envisaged incorporation of colleges of education, nursing and agriculture into universities and technikons. On the contrary, this precipitated closures of many of the colleges for whom absorption into either a university or technikon was not possible; and
- Suggested the restructuring of programmes and institutions.

In order to bring in regional balance and the efficient use of scarce resources, the programmes offered across institutions as well as the viability of each institution were considered. In this way, while some universities were later merged, some were left unchanged but were, nonetheless, made to forfeit key programmes in favour of others with the potential to make a contribution to the targeted disciplinary area. For example, while Stellenbosch University (a historically white Afrikaans-medium university in the Western Cape) was left untouched, it was forced to forfeit its entire Faculty of Dentistry to the University of the Western Cape (a historically Coloured university) which has a reputable dentistry profile and had been home to mostly Coloured, and a considerable number of black African students. In like manner, the historically white Rhodes University was forced to cede its entire East London campus to the University of Fort Hare (a historically black university and the oldest among black universities).

Following the much-debated 1996 NCHE Report, the Higher Education White Paper 3 – *A programme for higher education transformation* set in motion the legislative framework out of which was promulgated the Higher Education Act no.101, passed in 1997 – setting forth, among others, a new governance model, a new funding regime for public higher education (to

deal with past historical funding imbalances based on race), and statutory structures such as Council on Higher Education (CHE), and its Higher Education Quality Committee (HEQC). In terms of the Act, vested in the CHE was a broad mandate – to advise the Minister of Education in all matters concerning higher education policy. According to the Higher Education Act, the HEQC's primary mandate, under the auspices of the CHE is threefold: (i) to promote quality assurance in higher education, (ii) to audit the quality assurance mechanism of higher education institutions, and (iii) to accredit programmes of higher education institutions. In 2001 the Minister of Education, Professor Kader Asmal, unveiled the first National Plan for Higher Education. Its purpose, according to the Minister, was to 'provide a framework and mechanisms for implementing and realising policy goals of the White Paper [and the Act]'. The Plan made a case, and proposed mechanisms, for addressing the disjuncture between a graduate skills' profile and those skills needed for social and economic development. It 'laid down the law' not only insofar as ensuring that there is racial equity in the system but that it is also evenly spread across various fields of study. For example, in the historically white universities, no longer was it the issue that there is a 50% split between black and white students in terms of demographics. Rather, the Plan wanted institutions to focus on opening opportunities to black students in areas where they were most underrepresented, particularly in the commerce, science, and technology fields.

As a consequence of concerted efforts towards increase in black participation, as per the wishes of the NCHE report, the White Paper, and the National Plan for Higher Education, the university sector experienced a massive growth between 1988 - 1998 (Cooper and Subotzky, 2001). There was, however, a snag as 'black students were not significantly more successful in higher education than their predecessors, nor did they populate the high skill, high status fields of study in numbers anticipated by the equity policies' (Cloete, 2004:62). There were other problems, too. Firstly, government could not increase the proportion of its education budget allocated to higher education: it was expected that ridding the system of its perceived 'inefficiencies' would result in increased savings (or spare capacity) which would, in turn, help to absorb the new entrants into the system (Cloete, 2004). Secondly, government and progressive social forces were impelled to pursue simultaneously a number of goals and strategies that stood in severe tension with one another (Badat, 2004:22). For example, notes Badat, there is an intractable tension between dearly held goals and values such as equity/redress and quality, and social and economic development needs (2004:22). That said, these challenges need not detract from the fact that masses of people who otherwise would

not have had a privilege of higher education finally were granted their share through this massification<sup>43</sup> exercise, among other things.

It would not be accurate to suggest that it all begun in 1994 with the historic poll victory of the African National Congress (ANC)<sup>44</sup>. As a matter of fact, there had previously been much thought put into the future educational landscape and this is exemplified through a flurry of empirical studies commissioned in the extra-parliamentary circles<sup>45</sup> led mainly by the ANC, a government-in-waiting at that time.

Overall, there was a general consensus that reforms were necessary but the nature and the extent of these reforms garnered very little consensus, particularly as the change crusade descended from the philosophical grand macro policy stage to the micro level – at the level of the institutions themselves. Much of the discomfort from within the sector, it must be said, bordered more on narrow institutional interests than those of the system as a whole. For example, on the one hand, the white universities decried massification in that the larger faculty/student ratios would reduce the quality of tuition, while on the other, traditionally black universities were uncomfortable with the efficiency policy levers in that, as they saw it, were oblivious to their historical position of under-privilege. These claims got more pronounced as some of them realised that they were going to be either collapsed or merged with others.

The reconfiguration of the new higher education landscape was precipitated by the much-loathed report to the Minister of Education by the Size and Shape of Higher Education Task Team Report entitled *Towards a new higher educational landscape: meeting the equity, quality and social development imperatives of South Africa in the 21<sup>st</sup> century*<sup>46</sup>. Generating

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<sup>43</sup> Globally, there had been a number of experiments with massification. In Britain, when massification was introduced, it offered children from working class families a share of higher education, which hitherto had been an exclusive preserve of the upper middle classes and the aristocracy. The experiments showed, however, that policy intentions were not necessarily met. Although the numbers of working class minority groups surged, the rate of increase was still considerably slower compared to that of the upper classes. See, for example, Greenbank (2006).

<sup>44</sup> The African National Congress (ANC) is South Africa's majority party, in control of government, since the dawn of democracy in 1994.

<sup>45</sup> See for example, the Freedom Charter; a policy document adopted by the Congress of the People in Kliptown, Johannesburg in June 1955. Most of the ideals bequeathed in South Africa's Constitution were first Committee (NECC) project (National Education Policy Investigation – NEPI project) whose brief it was to chart for the ANC government-in-waiting education policy alternatives post-apartheid.

<sup>46</sup> For further reading, see, [http://www.che.ac.za/documents/d000009/New\\_HE\\_Landscape.pdf](http://www.che.ac.za/documents/d000009/New_HE_Landscape.pdf)

the most heat in the document were proposals to merge certain institutions, while others would be left virtually untouched. Along the way there were also compromises struck as political fallout became imminent, particularly in the case of some of the black universities with apparent political clout. For example, Kader Asmal, the Minister of Education, in a statement reassured one of the historically black universities, that 'the University of Fort Hare, which has come to symbolize our history of struggle will be retained' (2002:5). It was not only Fort Hare whose liberation struggle credentials came in handy, the historically Coloured University of the Western Cape also escaped the merger project.

At the level of policy, it soon became clear that the gigantic, fragmented, and racially- based system such as the one inherited post-1994 was not going to be wished away easily. Policy failures, argued Aslam Fataar, can be explained in the light of a struggle for alignment between policy discourse and the state's emergent macro-development orientation (2003:31). Put differently, the state was caught in a dual development imperative. On the one hand, the basic needs of the [mainly black] majority had to be met: this would include broadening access for most blacks who were kept out of the system for decades, as well as the redistribution of opportunity and wealth (Subotzky, 2005). On the other, counsels Subotzky, it was necessary to engage, as efficiently as possible, with both the new knowledge society and the highly competitive global economy. Here, both Fataar and Subotzky argue that there existed an inherent conflict between the demands of global capital on the one hand and macro-policy imperatives of a new state fraught with racial inequalities such as South Africa is on the other. With the efficiency school gaining momentum by the late 1990s, ironically, it was mainly the black universities (given their dire financial position, absent research culture, and weak internal financial controls, among others) that 'became a problematic...becoming the main issue, around which the government's policy approach revolved' (Fataar, 2003:43) as opposed to it focusing on those historically white institutions unfairly advantaged by apartheid. The historically black universities suddenly felt under siege. It would be incorrect to suggest, however, that there was no measure of anxiety at the traditionally white universities. For instance, the question of a new higher education landscape was first tabled, as one vice-chancellor of a historically white university commented:

There was a sense of institutions being caught in a whirlwind of inevitable regulation and control...there was a real threat of system low self-esteem. This led to a high-



noon syndrome, as vice-chancellors began to talk about looking for issues on which to challenge the state in a big way

(Ndebele, 2004:2).

Notwithstanding the attendant discord at policy-making and implementation level, South African higher education has considerable strengths. It remains one of the most vibrant in the continent, boasting academic programmes that produce sought-after graduates globally. For example, there is a preponderance of South African doctors and nurses in the United Kingdom and other parts of the developed world. In the Academic Ranking of World Universities (ARWU) Survey, only five African universities made it to the world top 500 universities, and of those, four were South African universities. These included the universities of Cape Town, Pretoria, the Witwatersrand, and KwaZulu Natal. The only other African university rated was the University of Cairo. Most significantly, all four ranked South African universities are in the historically white category – an indication of just how far-reaching the effects of the previous system of a racially-differentiated higher education sector have been.

Despite the discords at the micro-institutional level, the reform programme did take place. The system has now been trimmed from 21 universities and 16 technikons<sup>47</sup> to 17 and 6 respectively, with the latter now being called universities of technology. The Higher Education Act is in force, and the Council on Higher Education (CHE) continues to give advice to the Minister, as per its statutory brief. Quality assurance in the sector is being monitored by the CHE's Higher Education Quality Committee (HEQC) through periodic institutional audits, and a programme accreditation exercise.

### ***3.2.5 The History of Medical Schools in South Africa***

While the practice of modern medicine was evident in the Cape in the early colonial periods, owing to the arrival of the Dutch in 1652, the local environment had not matured to an extent that it could have a medical training facility, and thus those who were involved in the practice

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<sup>47</sup> Technikons were established in terms of the Vocational Education Act no.40 of 1967, and were further entrenched into the higher education sphere through subsequent ACT – Advanced Technical Education Amendment Act no. 84 of 1983. See also Pittendrigh (1988). Technikons are South Africa's own version of what was known to be polytechnics in the United Kingdom. The nomenclature in the new South Africa higher education landscape has since changed to 'Universities of Technology'. Technikons are formal vocational centres of learning imparting skill in a range of trades, e.g. electrical, auditing, interior design, graphic design, etc. Ideally, technikon graduates would qualify as technologists.

of medicine had to receive training elsewhere in Europe, most notably, at Leyden University medical school, (Louw, 1969). However, it would be erroneous to suggest the practice of medicine as a science is wholly foreign to the African continent. To demonstrate the point, Professor Bongani Mayosi, Head of Medicine at UCT's Medical School and Groote Schuur Hospital argued in his inaugural lecture on the future of medicine that:

the art and science of medicine emerged first in the Nile Valley of Africa, reaching its highest level of development – until modern times – in Egypt, land of the pharaohs. When Egyptian dynastic history begins, medicine is already an established, fully-formed science.... From the beginning of her history, Egypt possessed a mature, well-validated system of medicine containing systematic pathology, a completely-formulated pharmacopoeia, a formal knowledge of anatomy and physiology, a large medical literature, a well-defined medical curriculum, and a skill in surgery that was hardly matched outside Africa until the modern times... it is unthinkable that such knowledge, which is so sophisticated on a scientific level, could have emerged without a long period of anterior development. There is a 2400 year span from Hippocrates of Greece to modern medicine and the mature medical science that existed at the start of the dynastic period in Egypt would have had a pedigree at least as long (Mayosi:2007:4).

Having aptly sketched out this history of ancient Egyptian scholarly achievement in medicine, Mayosi most confidently impressed upon his captive audience at the lecture that:

Hippocrates in no way merits the title 'the Father of Medicine', either by virtue of his antiquity or the level of his scientific thought. If such a title belongs to anyone, it belongs to Imhotep the African.<sup>48</sup>

As has been demonstrated in the latter parts of the chapter, race has been a permeable part of the South African university landscape. In like manner, the medical schools that emerged alongside the university system also sought to reflect the racial regimentation of South African society with the result that three bands of medical schools completed the sector, (*see*

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<sup>48</sup> Imhotep, according to Mayosi (2007:4) 'is the African physician is the world's first universal genius and polymath. As chief counsellor to the pharaoh Djoser, he was a statesman of the first rank... as a gifted priest-physician, he was accorded that rarest of honours in ancient Egypt, that is deification as the god of healing'.

figure 2 below).<sup>49</sup> Taking into account colonialism, and more so apartheid, racial and ethnic regimentation are self-evident, hence the researcher elects to make a reference of three bands, with Band A medical schools constituting only those that are historically white and English-medium, while B denotes those that, although also white, were established to offer medical training to children of the ruling white Afrikaners. Band C constitutes a cluster of medical schools which were only open to blacks, with only a sprinkle of Coloureds and Indians at times.

**Figure 2: South African Medical Schools by Racial Typology**

<b>Band A</b>	<b>Band B</b>	<b>Band C</b>
University of Cape Town	University of the Orange Free State	University of Transkei (UNITRA)
University of the Witwatersrand, Johannesburg	University of Pretoria	University of Natal
	University of Stellenbosch	Medical University of Southern Africa (MEDUNSA)

University of Cape Town's Medical School was officially inaugurated on 7 June, 1912 (Louw, 1964:93) with advanced medical classes still to be obtained from universities in Great Britain recognised for that purpose.<sup>50</sup> It was only in 1919 that another English-medium university, the University of the Witwatersrand, accepted its first cohort of medical students<sup>51</sup>. While claims of 'open university' abound, Murray (1990) strongly asserts that doors were never really that open for black students to be admitted into the University of the Witwatersrand's medical school as it sought to appease its apartheid handlers by instituting a 'colour bar', and insisting on a quota system for black admissions so as to keep a close watch on black numbers. From 1959, blacks had to get a special ministerial permit to be admitted for study at universities designated as white. While there were 40 Coloured and Indian students by 1937 at UCT across all Faculties, black students were not allowed to enter the

<sup>49</sup> While most of the universities were collapsed and merged with the result that others receive new names. The author elected to use the 'old names' as it befitted the historical description hereon conveyed. For example, UNITRA is now named after the late liberation struggle icon, Walter Sisulu, as Walter Sisulu University. The University of Natal has since merged with the University of Durban-Westville, a historically Indian university to form the massive University of KwaZulu-Natal. The medical school has since been renamed the Nelson Mandela School of Medicine. MEDUNSA is no longer a full university in its own right, but instead, an appendage of the University of Limpopo, formerly, the University of the North.

<sup>50</sup> See also, Louw (1979) and McKenzie (1979).

<sup>51</sup> See, for example, <http://www.wits.ac.za/alumni/news/features/3272/medicalschooll.html> [Online].

medical school at that time. The first cohort of blacks was admitted into the UCT Medical School in 1985 (UCT Faculty of Health Sciences Reconciliation Report, 2003).

Band B represents the second wave of the evolution of medical training at which Afrikaner nationalism had begun to tighten its grip on Afrikaners as resentment of English- medium medical schools grew (UCT Faculty of Health Sciences Reconciliation Report, 2003). With this rise in Afrikaner nationalism, a new medical school was established in 1937 at the University of Pretoria, which itself had evolved from the former Pretoria Centre of the Transvaal University College that was established in 1908.<sup>52</sup> Later, another medical school opened its doors under the aegis of the University of Stellenbosch, hitherto Victoria College, which gained full university status in 1918. The University of the Orange Free State, whose history dates as far back as 1900, also had a new medical school erected on its grounds. Band C represents medical schools established for the primary purpose of accommodating black enrolments, especially in the case of MEDUNSA and UNITRA. In that regard, Bands B and C represent another phase of Afrikaner nationalism, which followed the political victory of the National Party in 1948, and with the formal promulgation of apartheid as official government policy.

The University of Natal's medical school was formally inaugurated in 1947, with the specific intention to accommodate the growing demands by blacks for medical training.<sup>53</sup> While Indian and Coloured enrolments were significant, the majority of those enrolled at the medical school were black. This need not suggest, however, that the university as a whole was predominantly black. Except for the medical school, the University of Natal was almost exclusively a white establishment. In January of 1978, in line with its policy of racial regimentation, the Medical University of Southern Africa (MEDUNSA) was established, following the promulgation of Act 78 of 1976 that paved a way for its establishment. The university's main aim was to train black doctors, dentists, veterinarians and allied health professionals to meet the demands of South Africa's [black] health system, since at that time almost 90% of medical personnel were white (*Limpopo leader* 2009:7). It is self-evident that with the introduction of a new medical school, the apartheid authorities must have realised that the University of Natal medical school alone was not in a position to meet the growing [black] demand. Here too, it became apparent that the two medical schools were not in a

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<sup>52</sup> See Lehmann, Andrews and Sanders (2000).

<sup>53</sup> See <http://www.ukzn.ac.za/about-us/ukzn-history.aspx> [Online].

position to cater adequately for the needs of 87% of the population that was black, while six medical schools served the small white population which constituted a paltry 13% of the population, (Kwizera et al., 2005:920). This meant that MEDUNSA and the University of Natal medical school, as dedicated training facilities for ‘non-whites’, would be augmented by a new medical school in the University of Transkei in 1985. The University of Transkei itself had been an appendage of the University of Fort Hare (the oldest historically black university in South Africa). Lehmann et al. (2000) suggest, however, that the apartheid government denied the new medical school subsidies and it was, as a consequence, forced to operate on a tight budget, most of which was obtained from other faculties of the university. After realising that the medical faculty at UNITRA was now, against all odds, fully established, the apartheid government put it under the aegis of the Development Bank of South Africa (DBSA) from which it finally received funding from 1989 (Lehmann et al., 2000:16). UNITRA was designed to offer medical training to blacks of Xhosa heritage mainly in the Eastern Cape. As a matter of law, whites (while they could teach at any of the black universities) could not be admitted at UNITRA (or any other university designated by law for blacks) for medical training in the same way that blacks were prohibited from admission to white universities and medical schools, unless upon successful petition to the relevant minister in the apartheid government.

The current medical training landscape has eight medical schools. Owing to the past legacy of apartheid and colonialism, these still operate on the basis of a ‘white consensus’. For blacks to survive predominantly white medical schools - because they would be alienated in a variety of ways - there is an expectation that they must seek social acceptance by assimilating white values (Mindel, 2003:2). Indeed, despite considerable evidence that blacks, in particular, now constitute a sizable portion of UCT’s overall student population, as well as a significant number of each medical class intake (Breier and Wildschut, 2006a; Ndebele, 2006 – alumni pamphlet), empirical analyses of the black experience at UCT paint a damning picture of black student experience (Erasmus, 2006; Steyn (2001). Overall, they decry the UCT environment as being inhospitable. These studies are corroborated by the Organisational Climate Survey of 2003 (UCT, 2007) and a follow-up survey conducted in 2007 called the Institutional Climate Survey (UCT, 2007) as well as the Truth and Reconciliation Report, ‘A Process for Transformation at UCT Health Sciences Faculty’ (UCT FHS, 2002).

While questions may arise as to the texture and quality of life at UCT's Medical School and at Wits, the formerly white Afrikaans-medium medical schools such as the University of Stellenbosch and the University of Pretoria have seen only a trickle of black students enter their doors (Lehmann et al. 2000) and a sudden surge in the numbers is not, in the immediate future, envisaged.

While the staff profile may mirror the nature of the larger institution, the University of Cape Town's Faculty of Health Sciences (as the Medical School is now known) still has the largest concentration of black medical students and registrars when compared with those at Wits and all three of the Afrikaans medical schools (Breier and Wildschut, 2006b). However, the three historically black medical schools, namely the University of KwaZulu-Natal's Nelson Mandela School of Medicine, Limpopo's Medical University of Southern Africa (MEDUNSA) and the Walter Sisulu University medical school, formerly UNITRA's medical school, combined, account for the majority of black enrolments (Breier and Wildschut, 2006b).

### **3.2.6 Summative Conclusion**

The chapter has explored the advent and gradual evolution of the South African higher education system from its embryonic phase, which catered merely for high school boys to its current, often enviable, position as a vibrant functioning system. The chapter however demonstrates unambiguously that the system flirted with the dominant ideology of white supremacy which, although it had its roots from colonial relations, became even more pronounced with the advent of apartheid. This paved a way for an even more fragmented environment, given that not only was race per se used as a differentiating tool, but that apartheid introduced a new phenomenon of intra-race differentiation, with black and white ethnicities also becoming distinguishing markers of according privilege and disadvantage. A mention was made here of Afrikaans universities, a 'Bush' university',<sup>54</sup> English-medium universities, the University of Zululand (for the Zulus), and so on. This then displays the socio-historical context within which the current higher education landscape can be understood.

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<sup>54</sup> 'Bush university' refers to the University of the Western Cape built mainly to accommodate the Coloured population in the Cape Peninsula and beyond. 'Bush' could be viewed as derogatory, as it is an offshoot of a term used to describe a subset of the indigenous people of Southern Africa, the 'Bushmen' - the preferred term for him is the San people. A considerable portion of the Coloured people have San ancestry.

In looking specifically at the history of the medical schools in South Africa, the chapter demonstrated that these, as constituent parts of the colonial and apartheid university, were affected by the same racialising experimentation. The early transition period was an epoch of deferred action as the state had to lay a policy framework within which the desired change of the higher educational landscape was to occur. Action came with the promulgation of new laws, with some critics charging that the state may have been overreaching and over-regulating. The chapter then concluded by looking at the University of Cape Town's Faculty of Health Sciences student, registrar and academic staff profile, and demonstrated that the Faculty has made tremendous strides in changing its medical class profile, while its progress in changing the staff profile has been lackluster. That is, the Faculty has struggled to show corresponding progress in terms of black registrar intake, save to mention that academic staff profile has very much remained the same.

## CHAPTER 4

### The University of Cape Town Post-Apartheid and the Redress Project

#### 4.1 Introduction

The chapter provides an analytical commentary on the University of Cape Town's experiment with South Africa's political transition which was accelerated soon after the inauguration of the new democratic government. As change seemed inevitable, the most obvious sites of contest became student and staff profiles. Similarly, the University, as historically white and privileged, was subjected to much scrutiny in terms of its dominant institutional culture<sup>55</sup> and the extent to which this provides an enabling climate for previously excluded sectors of society (blacks and women) to feel at home and thus perform to their fullest potential. Accordingly, the chapter concludes with a discussion on UCT's culture and examines whether this has been inclusive and affirming, and has enabled all to perform to their fullest potential.

#### 4.2 The University of Cape Town and the Transition Period

For someone from the post-apartheid era looking back to UCT's early days...the University appears essentially [to be] the result of an all-white South African colonial enterprise headed by an all-white executive. Arising out of the Western European tradition of autonomous educational institutions, UCT and its medical school was both separate from the majority of Cape society physically, but, more significantly, separate from the majority of South African society (that is, black South Africa) ideologically. From the University's inception in 1918, its practice of exclusion by race and gender was blatant and systematic, particularly within the medical school (Mindel, 2003:102).

The early years of transition presented South African higher education with multiple challenges given the sudden changes in the nation's political stratosphere. Given that higher

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<sup>55</sup> This refers to the perceived whiteness of an academic culture, articulated through the lens of white critique. It then becomes the overwhelming experience of black students and black academics of a dominant white culture (an ensemble of sayings, symbols, codes of speech, assumptions that are taken for granted as normal and of commonsense to all). See, for example, John Higgins's Council for Higher Education commissioned paper on the subject: [http://www.chc.ac.za/documents/d000146/8-Review\\_HE\\_SA\\_2007.pdf](http://www.chc.ac.za/documents/d000146/8-Review_HE_SA_2007.pdf) [Online].



education is characterised by severe race, gender, and institutional inequalities inherited from the apartheid era (Subotzky, 2003: 545) the new conditions in the post-apartheid period placed new demands for redress which the higher education sector could only have ignored at its own peril. Effectively, transformation meant that:

Each institution had to re-examine its mission and map its own vision to enhance its performance in increasing access to both students and staff from previously excluded sectors of society, quality teaching and learning, research and innovation, and service to society, especially to neighbouring communities (Ramphele, 2008:218).

While Ramphele clearly saw equity and excellence in complementary terms, there had traditionally been a strongly held belief by some at the University that transformation necessarily implied compromising (to a greater or lesser extent) academic excellence in making way for student and staff equity. Professor Michael Whisson's views on this are most telling, namely that 'UCT will have to do its part in making the change - probably with a considerable increase in numbers and a drop in the standard of entry requirements' (1979:16). Of course, there was often occasional criticism leveled at the transformation project in that it precipitously put a heavy weighting on race to the exclusion of other equally more important indicators of inequality. For example, Njabulo Ndebele, the former Vice-Chancellor of the University of Cape Town, once griped that 'transformation, originally understood as a complex and creative process of change, began to be reducible to a single measure of success: race' (2004:2). He then proceeded, saying that 'sometimes concessions were made to gender and disability. In this context, to be declared untransformed could lead to a damning crisis of legitimacy'.

While both the University and its medical school<sup>56</sup> engaged in a process of change (and the environment seemed fittingly ripe) this preceded 1994, as will be outlined in the later section of this chapter. This engagement may be attributed to the presence and profound influence of the old liberal coterie within the University in general and the Medical School in particular. Among those that dared to prophesise was Professor Michael Whisson, who in 1979 declared that 'it seemed to us that we should envisage, as a realistic possibility, the transformation of

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<sup>56</sup> While the formal nomenclature only has the UCT Faculty of Health Sciences (UCT FHS), where context dictate, the author has preferred to use UCT medical school instead of the UCT Faculty of Health Sciences.

South Africa into a black-dominated and theoretically non-racial state' (1979:15). However, some in the liberal circles were less enthusiastic about such an impending revolutionary moment, not so much because they resented change but rather in recognition of the staying power of whiteness (and the cultural rootedness of the University on such dominant norms, assumptions, and values of that culture) as David Welsh, a UCT Political Studies professor forcefully counseled:

the universities are rooted in society and, in a segmented society like South Africa, they may be, and invariably are, rooted in a particular segment [of the population]. [Because] university espouses universal goals; it may strive to attain what Sir Eric Ashby says is the ambition of every great university – cosmopolitanism; but it will, nevertheless, be a part of a social environment and, to a greater or lesser extent, tied by or dependent upon that environment [in the case of the University of Cape Town – a white social milieu] (1979:22).

Given the changes in the social environment, necessitated by the ripe political climate just preceding the release of Nelson Mandela, there was, for example, already in 1991, an Employment Equity Research Project<sup>57</sup> with soon to be Vice-Chancellor Dr Mamphela Ramphele as its Director. 'Equal opportunity' employment policy, as part of the greater transformation project at UCT had three integral components, firstly, recruitment, selection and promotion of staff; secondly, staff development; and thirdly, changing the culture of UCT. In line with this early thinking in respect of the transformation project, the researcher accordingly elected to classify the archival document material into three sections in order to account for how the university (given its contradictory history of protest and collusion) traversed the transition period, post-apartheid. Firstly, there is a section on staff equity; secondly, on student equity (with commentary on admissions/enrolments and output); and, thirdly, on the institutional culture and/or the institutional climate.

#### ***4.2.1 Student Equity at the University of Cape Town***

From about the late 1980s, UCT made a conscious effort to improve what was, hitherto, a grim record in respect of its student profile. Thus, a student equity policy and action plan was adopted prior to the landmark 'miracle' of 1994 wherein a new democratic government took

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<sup>57</sup> See the full report entitled, *Employment Equity at UCT*, 1993.

office. For example, Mamphela Ramphele in defending the use of race as a proxy for disadvantage, notes that ‘if race was not taken into consideration in UCT’s student admission criteria, the chances are that UCT would not have progressed from the position it was in 1985 to that in 1992 when 40 percent of new entrants were black’ (1993:9)<sup>58</sup>. In this instance, the Academic Development Programme (ADP)<sup>59</sup> became central in ensuring that those that came through the system unprepared were given the necessary assistance to succeed. As a result of the ADP, the University was able to boast in its official brochure that ‘a student body that was 90 percent white in 1979 when UCT marked its 150<sup>th</sup> anniversary, is 50 percent black in 2007’ (UCT, 2007). Given this hard data, it is appropriate and prudent to acknowledge this level of progress. In making sure that equity is a hallmark of the institution’s overall admission processes, a Student Equity Policy (UCT, 2004) was formally adopted and approved by the Council<sup>60</sup> of the University in 2004. Apart from setting out guiding principles in the selection of its student cohort which includes transparency and fairness, redress, diversity, and ‘non-racialism’, the policy made provision for enrolment planning that must include the setting of equity targets by Faculty and per programme, especially in those areas of study where persons from the designated groups are grossly underrepresented, for example, in medicine, engineering, and commerce. Currently, the University is in the process of reviewing the student equity policy. While University authorities maintained that this was an innocent exercise, certain stakeholders, especially members of the ANC-aligned South African Student Congress (SASCO), the National Education, Health & Allied Workers Union (NEHAWU), and a number of concerned black academics were more suspicious of the University’s motives.

The social and political context for these concerns first surfaced as the backdrop of a highly spirited (and at times hostile) debate between former Deputy Vice-Chancellor Professor Martin Hall (with responsibility for transformation) and Professor David Benatar of the

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<sup>58</sup> ‘Black’ is used in this context by Dr Ramphele in a generic sense to include all groups other than white, namely, African, Coloured and Indian.

<sup>59</sup> Black students from disadvantaged backgrounds would usually be enrolled in an extended programme so as to ease them gradually into the rigours and demands of academic life without necessarily having their tuition compromised. For example, it was common cause that most black students at the Medical School would be enrolled onto the extended 7-year degree programme as opposed to the standard 6-year mainstream programme. It needs to be emphasised, however, that such variations did not imply differences in outcomes. That is, black medical graduates will exit the system with the same depth of knowledge as their white counterparts.

<sup>60</sup> University Council is a statutory body constituted in terms of the Higher Education Act of 1997 and the relevant statutes of a University. It is supposed to be independent and exercise oversight on all matters of governance at the given institution.

Department of Philosophy over race and affirmative action. At his inaugural, lecture Professor Benatar derided the University's use of race as proxy for disadvantage in making staff appointments and in deciding on student admissions.<sup>61</sup> In particular, he contended that 'affirmative action requires a system of racial classification and a mechanism for assigning individuals to racial categories, favoring some people merely on the basis of such assignments'<sup>62</sup>. There have been others (notably white)<sup>63</sup> both within and without the University who rallied behind Professor Benatar. Admission criteria at the Medical School were often the most obvious targets post Benatar's inaugural lecture. For example, Tony Leon, the then leader of the mainly white Democratic Alliance (official opposition in parliament) was reported to have bemoaned UCT policy overtures thus:

The university's guidelines for admissions for 2007 revealed that for certain courses in the health and law faculties, black and coloured applicants required up to eight fewer matric exemption points than anyone falling into the category "open" [which is predominantly white]'... The usefulness of such representivity is that it enabled the government to promote one race group's interests (Da Costa, 2006:4).

The debate raged on in the public domain for a considerable time. Those opposed to the policy were usually white and those in favour of the differential admissions criteria (mostly either black or members of the University senior executive management). The latter were often caught on the defensive. The following excerpt captures the temperament of the debate at the time:

My daughter would like to study law at UCT, but, because she is white, she needs five points more than any of the other race groups. Could someone out there please explain to me how is this not a racist policy (Fourie, 2006:8).

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<sup>61</sup> Benatar led the attack in his inaugural lecture of 11 April 2007 titled 'Justice, diversity and affirmative action' by declaring that AA was not the right way to tackle injustice. From his provocative and syllogistically mounted argumentation ensued a number of responses taking aim at him. Most notably, refer to refutations by Gobodo-Madikizela (2007), Hall (2007), Raditlhalo (2007), Hoveka (2007), Erasmus (2007), London (2007), Haupt (2007), Bloch (2007), Brown (2007) and Thaver (2007).

<sup>62</sup> <http://www.uct.ac.za/mondaypaper/archives/?id=6280>

<sup>63</sup> See, for example, Rolfe (2007), Berger (2007), Galgut (2007) and subsequent pieces in the popular press by David Benatar himself responding to critics of his seemingly anti-racial equity stance – these are best captured in Benatar (2007a), Benatar (2007b), Benatar (2007c), Benatar (2007d), and Benatar (2007e).

Then, in response to one letter to the editor on the same issue, Professor David Dent of the Medical School responded:

This Faculty (Faculty of Health Sciences) does have a selective admissions policy, which it is convinced is vital to the future of medicine in this country....At the same time, every applicant we accept is a high achiever. UCT maintains the highest standards in measuring student success, and makes no concessions in this regard. The Faculty regrets using race as a measure for admission, and looks forward to the time when it would not have to do so (Dent, 2006:8).

Ms Fourie represents the wider white world that has sought to look at redress measures with skepticism, if not outright resentment. As presumably a beneficiary under apartheid, Ms Fourie here reconstructs South African whiteness by seemingly dethroning it from an erstwhile privileged position and reconstructs it as a hapless innocent victim of the new black order. This implication is that there may be a new kind of racism in which blacks (and their like-minded whites such as Professor Dent) are cast as perpetrators of reverse discrimination, with white automatically becoming vulnerable agent(less) bystanders.

**Figure 3: MB ChB and M Med Enrolments<sup>64</sup>**

<b>Year</b>	<b>Black students as percentage of MB ChB enrolments</b>	<b>Black students as a percentage of M Med enrolments</b>
2005	28%	10%
2006	29%	14%
2007	31%	11%
2008	32%	10%
2009	34%	10%

From the above table it is clear that the student equity policy and/or the quota system has ensured a gradual increase in black undergraduate student enrolment with black students' share of the undergraduate class appreciating from 28% in 2005 to 34% in 2009. Data also illustrate that while there is recognition that some progress, albeit marginal, has been made in

<sup>64</sup> Data obtained from University of Cape Town Institutional Planning Department (2010).

improving black enrolments, progression into graduate studies remains a concern, with even fewer blacks gaining entry into the registrar programme. As the table demonstrates, the biggest surge in black numbers appears to have been in 2006, with black enrolment accounting for 14% of the total. Since then, black enrolment figures have somewhat stagnated at about 10% between 2005 and 2009. While there may be a myriad of reasons for the precarious black share of total enrolments, most seem to hint at socio-historicity and the centrality of race<sup>65</sup> (London, Kalula and Xaba, 2009).<sup>66</sup> In their study, they found that blacks were more likely to describe their registrar experience as unwelcoming, contrasting sharply with their white registrars respondents.

It has to be said however that while black students numbers increased at the University of Cape Town during the period 1988–1998 (Cooper and Subotzky, 2001). From 2000 and 2008, total black enrolments at this University seem to have almost leveled off (Department of Education, 2010). For example, data shows that in 2000, total black enrolments at the University of Cape Town accounted for 33.2% of the total student body while in 2008, this rose slightly to 34.5%, thus recording a marginal increase of just over 1% for the period. Compared with the University of the Witwatersrand, a historically white English-medium university in Johannesburg, the University of Cape Town lags far behind. For example, the same data (Department of Education, 2010) illustrate that while black student enrolment accounted for only 36.2% of total enrolments, there was, however, a recognisable appreciation to 45.9 in 2008 of black enrolments at the University of the Witwatersrand.

#### ***4.2.2 Staff Equity at the University of Cape Town***

The University's Employment Equity Policy put measures in place to help persons from the disadvantaged sectors of society such as black people, women and persons with disabilities to access employment at the University. Following the lead from the University, the Faculty itself also made a case not only for equity but for transformation in general. In that regard, the following excerpt from its website is most telling:

In order to overcome this legacy [of apartheid], the Health Sciences Faculty sees the role of the Transformation and Equity portfolio and its various programmes for

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<sup>65</sup> Their article is obtainable from: <http://www.biomedcentral.com/1472-6920/9/26>[Online].

institutional transformation, as critical. Although [itself] also a response to legal [e.g. the Employment Equity Act] and other policy imperatives [e.g. higher education policy from the Ministry of Education], the Faculty's Transformation Programme is firmly driven by a commitment to self reflection that is seen as both educationally sound and morally appropriate.<sup>67</sup>

Such educationally and morally appropriate measures included the remake of the MB ChB curriculum. The reconciliation drive was given impetus by the national Truth and Reconciliation Commission finding that insinuated some collusion between academia and the apartheid state, with medical schools singled out as the most intransigent in human rights abuses. The curriculum changed from the old biomedical approach (Mindel, 2003) to a new holistic approach that takes into account the psycho-social aspects that are also vital for the healing process. The institutional reconciliation effort included convening a Faculty assembly at which a new statement of values was adopted, which then became part of the work and life of the medical school (Perez and London, 2007).

The University of Cape Town's Faculty of Health Sciences staffing complement is constituted somewhat differently to the rest of the University, given the peculiarities of its mandate - which is, in the main, two-pronged - to teach as well as to contribute to provision of quality health services in the province, particularly in the associated academic hospitals which are owned and managed by the Provincial Government of the Western Cape (PGWC) on behalf of the National Department of Health.

As a result of the symbiotic relationship between the University and the PGWC, there are three layers of employees associated with the Faculty of Health Sciences. The first consists of medical staff who are appointed in terms of the joint agreement between the Provincial Government of the Western Cape and the University. These posts would, therefore, be subject to PGWC (public service) conditions of service, and by implication, falling outside of the immediate control of the University in terms of their recruitment, selection, and general human resource management matters. There is a view that having this layer of employees may make equity less attainable since the University is not involved in how these staff are recruited and managed. Similarly, there is an opposing view which holds that the state is

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<sup>67</sup> Available: [www.health.uct.ac.za/transformation/whytrans.htm](http://www.health.uct.ac.za/transformation/whytrans.htm) [Online].

more likely to put its employment equity policy into effect. It is in the interest of the state that all employers adhere to the new employment law regime and, in that respect, it would therefore want to be seen to also playing its part. In 1998 45% of staff at the Medical School were appointed in terms of the joint agreement (under PGWC conditions of service).

Employees who are joint appointments that is, appointed jointly by the University and PGWC, but on the University's conditions of service make up the second layer. Here the University is able to further its equity objectives given that it assumes full control of the recruitment and selection process, as well as the management of these staff. 41% of staff in 1998<sup>68</sup> were on joint appointments under the University's conditions of service. Also in 1998, only 14% of posts at the Medical School were appointments made solely by the University, with the University's full conditions of service attached thereto. While these were measures that were seen as necessary in realising equity goals, development equity posts<sup>69</sup> and research fellowships<sup>70</sup> seem to have been given prominence as a means to quicken the pace of changing the profile of the academic staff.

**Figure 4: Staff Headcount According to Conditions of Service**

	<b>Category of staff</b>	<b>Head count per category</b>
<b>Group 1</b>	Joint staff – PGWC conditions of service <sup>71</sup>	572
<b>Group 2</b>	Joint staff – UCT conditions of service	97
<b>Group 3</b>	Staff on the University's conditions of service	595

*From, Employment Equity: Audit and Plan for the Health Sciences Faculty, UCT (1998)*

<sup>68</sup> While this researcher would have preferred to cite more recent statistics, this was not possible since what is cited are the only data currently available as there is no single integrated database for PGWC employees and those employed on full UCT FHS conditions of service. 1998 was the last time that the UCT FHS attempted to put these data together.

<sup>69</sup> These are contract development posts for high potential candidates, who are black and women South Africans, their purpose being to provide additional experience, competence or qualifications needed to compete successfully for future permanent posts.

<sup>71</sup> Since 1998, the number of joint staff on PGWC conditions of service has declined. This has paved a way for the University to take full responsibility for charting its own path and taking full responsibility for progress and/or lack thereof in the staff equity front.



Elsewhere across the University other initiatives came into fruition on the advent of the promulgation of the Employment Equity Bill in 1998 as formal law. These include the Administrative Internship Programme (AIP) and the Temporary Employment Bureau (TEMBU). The aim of the former was to recruit young black university graduates into entry level administrative posts (UCT, 1998a), while the latter was a mechanism for recruiting and developing black candidates, in particular, to mainly clerical and secretarial posts and to address particularly acute under-representation of African secretaries, with TEMBU, for example, piloting a Secretarial Internship Programme. The under-representation of, particularly, Africans to administrative and secretarial posts is socio-historical and can thus be traced to the dominant views on blackness and the corresponding white supremacist thought. Also, it needs to be borne in mind that Cape Town was a Coloured labour preference enclave, in which Coloureds were given preference in administrative and clerical jobs at the expense of Africans, resulting in these distorted patterns of employment in the Western Cape.

Staff profiles in most higher education institutions reflected glaring inequities in race and gender. In 1994 more than 90% of academic and administrative staff of most historically white universities were white males (Ramphela, 2008:1999). As Gibbon and Kabaki aver, one of apartheid's most notorious policies, job reservation, ensured that access to almost all professional, high level and high-paying jobs in the economy were restricted to whites (2002:186). The Employment Equity Report of the Equal Opportunity Research Project described it as follows:

The greater the prestige, salary, status and influence particular positions have, the greater the extent to which they are dominated by white staff members and men. Positions which have a low status and prestige, and which wield little influence in the institution tend to be dominated primarily by black staff members and women (UCT, 1993:29).

It was within this context that the first ever Employment Equity Policy (at the time referred to as Equal Opportunity Employment Policy) was adopted by Senate and Council in 1991. In its preamble, the policy accordingly recognised that:

The current situation at UCT reflects, on the one hand, its historical development as a white male institution, and on the other, its location within South African society with

a strong ethos of racial and gender discrimination. The adoption of the Equal Opportunity Employment Policy is both a recognition of the lack of equal opportunity, and a commitment to redress the imbalances of the past.<sup>72</sup>

Just as there was disquiet (notably from the white members of UCT staff) about the student equity policy, especially with regards to the selective admissions that take into consideration race, predictably, from the very beginning of the Equal Employment Opportunity Policy in 1991, there was a marked difference in terms of how both black and white members of the University community received it. The reasons can, perhaps, be attributed to differentials in social histories of both blacks and whites as racialised subjects. In the report, for example, white respondents (both academic and administrative) protested that ‘I think UCT is too pro-black’, ‘equal opportunity is just another name for reverse discrimination’, ‘it seems to be open hunting season on the white male’, ‘if you are not black or female at UCT, you don’t stand any chance’. In contrast, it is noted in the same policy document that ‘nearly all the black respondents (93%) thought that for reasons other than their qualifications, some people had a much better chance of promotion than others’ (1991:33).

While the University over the years went through the motions of putting under the microscope its institutional climate<sup>73</sup> as well as placing a special focus on employment equity<sup>74</sup> as one of the objectives towards attaining total transformation, Figures A and B demonstrate that the gains have been, if anything, modest for a period of nearly 10 years. This is even despite the much trumpeted (but seemingly ineffectual) Grow Your Own Timber (GOOT) project of the former Vice-Chancellor, Mamphela Ramphele, of which she so approvingly wrote of, despite its apparent failure to ensure a sustainable black academic pipeline (2008:200). The march towards greater equity, though, has to be seen in the context of transformation as work-in-progress. That is, the transformation of society ought to be seen not so much in linear terms but as an on-going social process of experience.

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<sup>72</sup> Herbstein (1993) gives a useful account of how this policy fared among the myriad of challenges and limitations it faced. In the final analysis he concludes that there were noticeable gains in student enrolment while the policy did not meet with much success in respect of the employment of staff.

<sup>73</sup> See, for example, the UCT Organisational Climate Survey, 2003 and a follow-up study in 2007, the UCT Institutional Climate Survey. Both surveys showed that white respondents appraised the UCT environment in overly positive terms, while African members of staff recorded the most negative responses, meaning ultimately that they did not feel at home at UCT.

<sup>74</sup> This is exemplified in the adoption of a new Employment Equity Policy in 2004.

**Figure 5: University of Cape Town Academic Staff Profile**

<b>Year</b>	<b>Total</b>	<b>Black staff as a percentage of total staff profile</b>
2005	211	18%
2006	226	18%
2007	268	20%
2008	292	20%
2009	280	19%

While there was a nominal increase of black academic staff from 211 in 2005 to 280 in 2009, in real terms, the increase was marginal since it only constituted 1% appreciation from 18% to 19% respectively. The above data, therefore, demonstrate that the changing of the academic staff profile remains a challenge for the University and much still needs to be done in recruiting and retaining a new cadre of black academics. More specifically, increased access to health care can only be assured if the teaching and clinical cadre is recruited from a cross section of South African society, and not just simply from the traditional white male base. A point is made by London, Kalula and Xaba (2009) that while the argument stem mainly from a particular vantage point of human rights, there may, in addition, be clinical benefits derived from a diversified medical workforce.

#### **4.2.3 The University of Cape Town's Institutional Culture and/or Institutional Climate**

One of the most recognizable iconic figures of the University of Cape Town Faculty of Health Sciences tellingly wrote in the preface to his magnum opus on the history of the medical school that:

From its beginnings [the University of Cape Town Medical School] <sup>75</sup>was very fortunate in inheriting traditions. It has always been not a new thing of local origin but a transplant still rooted in the old, old traditions of medicine, getting its nourishment in South African soil indeed, but with roots deep in history going back via Edinburgh, Dublin, Liverpool and London, through Vienna, Leyden and Paris, down to Padua, Moutpellier, Bologna and Salerno to ancient days (Louw, 1969: xv).

<sup>75</sup> Here, the researcher elects to refer to the UCT's Medical School instead of using the current official nomenclature the University of Cape Town's Faculty of Health Sciences to emphasise the primacy of medicine against other health professions in the health sector. This primacy is also implied in Professor Louw's historical analysis of the genesis of the UCT Medical School.

(Louw is an acclaimed professor of pediatric surgery at UCT, also dubbed the ‘father’ of pediatric surgery).

This section is two-pronged. Firstly, it gives an analytical commentary of culture at UCT which is an integral aspect of transformation. Secondly, it simultaneously articulates how institutional culture is felt, perceived and experienced. Steyn and Van Zyl (2001:9), in their study on the University, defined institutional culture as ‘the deep-rooted sets of norms, assumptions, and values that predominate and pervade most of the environment on a day-to-day basis’. In this instance, given the centrality of race and the attendant power dynamic at the University between white in-groups and black out-groups, such norms, values and assumptions will, in all likelihood, be those of the dominant white group. This underscores the supposition that culture is inferential, that it is an intangible (Cusick, 1987 cited in Kuh and Whitt, 1988:10). Handy 1976 (as cited in Kuh and Whitt, 1988:10) sees culture as ‘something that is perceived’ and ‘something that is felt’. Notwithstanding the above, for the purpose of this research, institutional culture is simply understood as ways of doing [how we do things here], of perceiving, of thinking, in fact, ways of being that are made implicit by members of the dominant group. In decoding institutional culture, education expert and social commentator Jonathan Jansen conjured up the following formulation:

It has to do with whose portraits and paintings appear in the corridors; it has to do with what collections dominate the library; it has to do with who gets honorary (doctoral) degrees (and who does not); ...it has to do with who continues to gain institutional contracts and who remains marginalized; it has to do with whose language dominates a public meeting or event, and whose excluded (Jansen, 2004:7).

In concluding his treatise on institutional culture, Jansen declares that ‘in the end, the real test of whether South African institutions have achieved inclusive institutional cultures might well be the extent to which blacks and whites feel at home within universities’. While it is clear that most blacks do not feel at home at most historically white universities,<sup>76</sup> there have

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<sup>76</sup> See Department of Education (2008) report prepared by the ministerial committee on transformation and social cohesion and the elimination of discrimination in public higher education institutions. Also, the Institutional Climate Surveys at UCT in 2003 and 2007 point to frailties in the institutional climate, with blacks

been no such corresponding accounts of white displacement (not feeling at home) as may be implied by Jansen. Perhaps Jansen's point was to alert us to the inherent dangers of essentialising alienation as an exclusively black phenomenon. Home as a theoretical construct, however, requires careful application for it ought to be noted that it can play multiple, and often contradictory, roles at the same time. While homes can be nurturing, comfortable, safe social spaces, they can simultaneously be places of conflict, strife, contestation, and disenchantment (George, 1999). This is perhaps best exemplified in conflicting accounts that marginalised groups may give about supposedly hostile white social spaces. That is, while they may recognise their position as outsiders, and the subtle hostility towards them, they may at the same time consider such environments as relative places of growth, given the resources at the behest of these institutions<sup>77</sup>.

Addressing racism is, however, central to any efforts geared towards addressing the frailties of an institutional culture. Accordingly, there has to be recognition of the centrality of racism in the remake of the institutional culture. In particular, whites as past beneficiaries of the apartheid largesse have a particular responsibility. Denialism of the racism scourge can only drive a further wedge between the black outsiders and white insiders. The 1993 Employment Equity Report of the Equal Opportunity Research Project similarly averred that 'without this recognition, changing the institutional culture will be much more difficult, but no less urgent' (1993:37).

In some respect, it can be argued that the university-wide *Strategic Planning Framework* devised by the Transformation and Implementation Committee during Dr Mamphela Ramphele's tenure as Vice-Chancellor, was more aspirational. While it envisioned 'an institutional culture of the Faculty of Health Sciences [that] will be enabling and enriching (1998:21), the report formulated by the Health Sciences Faculty's Transformation and Equity Workgroup entitled 'Employment Equity: Audit and Plan for the Health Sciences Faculty' went to great lengths to problematise institutional culture with little romanticism reminiscent of the Strategic Planning Framework:

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the most negatively affected. There have consequently been no significant accounts, if any, of white alienation within historically white institutions.

<sup>77</sup> See London and Perez (2001).

Norms and practices in the Health Sciences Faculty may reflect the stereotypic notions of what staff should do and should be. These cultural practices may be important barriers to assimilation of new staff, as well as retention of staff in the Faculty (1998:6).

These are norms, practices, ‘unstated, taken-for-granted assumptions arising out of the particular, culturally-specific positionality of patriarchal, white middle-class English-speaking South Africans simply taken as normal and appropriate in all contexts’ (Steyn and Van Zyl, 2003:1). Of concern, and this is a qualifying point raised by Steyn and Van Zyl, is that ‘the power of the norm has the effect of creating deep-seated discomfort and alienation among [those] that do not fit the norm’, hence the out-groups’ not feeling at home. With particular reference to the University of Cape Town, Steyn and Van Zyl concluded that ‘while certainly not homogenous, the dominant institutional culture at the University of Cape Town subtly supports established [white] privilege and practice of exclusion’ (2003:3).

#### **4.3 Summative Conclusion**

The chapter looked at the University of Cape Town in terms of its experience with the political transition that brought to bear new demands which can be loosely clustered under the much-contested rubric of transformation. At the heart of the contestation during the period of transition (and it is not suggested here that the intensity of such contestation has receded) was whether or not equity (a political imperative of the transition period) detracts rather than edifies academic excellence (a necessary condition for any place of learning). The delicate dance between equity and excellence was laid bare in the discussions in this chapter on student equity, staff equity, and institutional culture and/or institutional climate. While there has been a marked improvement in the student profile by race, with greater numbers of blacks accessing the University than it has been the case during apartheid and early period of the political transition, the same could not be extended to staff, given the modest performances on this front. The section ends with a discussion on institutional culture and climate which lifts the veil on the underlying attitudes buttressing the establishmentarians’ perceptions, views, and assumptions on the black cultural ‘other’. In the end, it is fitting to conclude that the University’s experience with the transition has, to a greater extent, been circumscribed by race.

## **CHAPTER FIVE**

### **Methodology**

#### **5.1 Introduction**

The chapter begins by making a case for a qualitative approach as a preferred research paradigm which is consonant with the subject matter that is under investigation. It argues that since the purpose of the research is essentially about showing how the social world is understood, articulated, and experienced, there can be no more apposite research paradigm than a qualitative one. Also drawing from the feminist research paradigm (which usually decodes the inequities in power relations between the two sexes and vehemently disputes positivist postures that regard scientific inquiries as being beyond reproach – value-free and ideology-free), this researcher too, like the feminist inquirer, acknowledges that as a racialised subject himself, he comes into the research process with pre-acquired assumptions, ideas, and presuppositions. These, to an extent, offered particular lenses through which this researcher made sense of the respondents' own social world, their understandings, articulations and interpretations of their social reality. Therefore, this researcher accordingly eschewed the usual positivist inclinations of posing as a neutral, ideology-free, and disinterested observer by, instead, being conscious of his pre-acquired frame of reference throughout the research process. In this chapter, the researcher further makes a case for his choice of UCT's Faculty of Health Sciences by emphasising its paradoxical past, as a subject of great research curiosity. In this instance, the researcher highlights the often contradictory roles the University simultaneously assumed at the height of apartheid by posing, in one instance, as a hotbed of anti-apartheid white leftist activism, while on the other, colluding fervently with the apartheid racist politburo to keep blacks out of its milieus. The chapter then concludes by detailing the qualitative analytical procedures and offering a brief introduction to the empirical analysis section.

#### **5.2 Towards a Qualitative Approach**

The investigation undertaken falls within the paradigm of qualitative studies. As Mason has argued, qualitative research is 'grounded in a philosophical position which is broadly interpretivist in the sense that it is concerned with how the social world is interpreted, understood, experienced, produced or constituted' (2004:3). Noting that the foremost preoccupation in the study is to find out how the white academic milieu was being experienced, understood and interpreted by black registrars themselves, a qualitative approach, as opposed to a quantitative one, was preferred as it would yield many in-depth

descriptions which would illuminate, not just the experience, but also the deeper insights, into some of the social factors shaping the actual experience, e.g. the way a white head of department would be reluctant to shield black registrars from racism. De la Rey (1999) makes a similar argument in her study of women professors in the South African academes in declaring her preference for a qualitative research approach. In the end, however, qualitative research must be held to the same standards and scrutiny as would quantitative research. Apart from being rigorous and offering not only thick descriptions, but also explanations (hidden meanings and/or interpretations) it must, necessarily, 'involve self scrutiny by the researcher or active reflexivity. This is based on the belief that the researcher cannot be neutral, or objective or detached from the knowledge and the evidence they are generating' (De la Rey, 1999: 7).

In the body of this research, therefore, the researcher intermittently pauses to reflect on his own position and 'story' in understanding the respondents' interpretations of their lived experiences at the University of Cape Town's Faculty of Health Sciences (UCT FHS). These points will become much clearer in the later sections where the researcher declares his leanings to feminist research paradigm as well as accounting for his own positionality in the thesis. Moreover, personal narrative and/or personal reflections are also a key component of Critical Race Theory (CRT) which provided a theoretical framework through which to decode the lived experience at UCT FHS, a predominantly white medical school in South Africa.

### **5.3 Subjective Experience and Feminist Research Approach**

Feminist research paradigms arise out of women's struggles against patriarchal oppression and the need to have women's perspectives factored into the actual research activity to better their precarious social positioning in patriarchal systems. Having to shoulder the burden of poverty, illiteracy, humiliation and general exclusion from meaningful participation in society, women rose to assert themselves and stake a claim across many different kinds of occupational fields, not least in the knowledge 'industry', in which their relative absence is noticeable. The purpose of feminist research, therefore, is to foreground the experiences of women as told by women themselves. Thus, the feminist research paradigm sees women as active rational agents with capacities to construct their own social reality. Male perceptive lenses have always been employed in gazing at the experiences of women. The predominance of the male perceptive frame assists in privileging male hegemony and thus perpetuates the



oppression of women. In like manner, other oppressed groups in society may suffer the same fate as that of women. Just as it is advocated in feminist literature that specific cases of study dealing with women are necessary because 'women experiences are different and thus constitute a particular vantage point from which to view social reality' (De la Rey, 1999:90), black people who lived through apartheid (and who continue to feel shackled even today despite the change in political fortunes) have untold stories still to tell. This research, then, must be seen as an attempt to give a selected group among the marginalised blacks of South Africa a voice to tell their own story and/or to have their own stories told by someone who can relate to the totality of that experience by virtue of his group membership. The researcher will now elaborate below on his positionality in the research, and the attendant need for self reflexivity – a key tenet of the feminist research paradigm.

#### **5.4 Locating the Researcher/the Author/the I**

Since the researcher is also the instrument of the research, a reflection on his personal position and racial identity within the institutional context is warranted (Jansen, 2009:19). This researcher's first encounters with race, that is, his early beginnings of racial construction (how blackness and whiteness can be interpreted) – were experienced as a child growing up in the rural hinterlands of South Africa. Although he never had any close encounters with whites, the elders around him, through their day-to-day racial talk and through idiomatic expressions, used to foreground the black and white power relations in South Africa with notable contradictions. For example, there used to be an expression in Sepedi that *sehlare sa Mosotho ke lekgowa*, loosely translated to mean the white man is the black man's best medicine. In other words, blacks needed whites to exercise trusteeship over them, for on their own, they cannot redeem themselves. Thus, white help, white guidance, white approval, white validation, were all necessary (and even sufficient) ingredients of blackness, that is, they formed the very essence of what it meant to be black.

As part of his early socialisation, this researcher learned, not via whites but via blacks, that blackness was the problem. Simultaneously, he would, also on occasion, hear the selfsame village folk saying in Sepedi *ditshweu ga di tswane*, meaning, whites would always close ranks to protect one of their own, irrespective of the merits of the particular case at hand.

Doubtless, the first idiomatic expression seems to suggest that the village folk may have bought and internalised the white racial frame that purports white to be inherently superior

and blacks, a subtype of mankind, dependent and looking upon whiteness for expression, for sustenance. Nonetheless, the second saying departs markedly from the apparent acquiescence of the first. In the second saying, we see blacks as being overcritical of white oppression in general and white overdependence on whiteness, in that they would want to close ranks even when rationality may dictate otherwise. This, therefore, illustrates a deeper sense of racial consciousness by ordinary black village folks. Thus, while they may seem to have naturalised and ‘unproblematised’ whiteness, they simultaneously see whiteness as the problem. It is such contradictions of the researcher’s earlier experience with race that have contributed and informed his thinking as to the many varied frames with which to look at race – in particular, racial consciousness as explicated in the white and black binary. He then realised that he needed to be conscious of these contradictory and competing frames in the conduct of this research.

Acclaimed Nobel Peace Prize laureate, Archbishop Emeritus Desmond Tutu, dramatises the white frames through which blacks have sought to see themselves relative to whites. As Associate Director of the Theological Education Fund (TEF) of the World Council of Churches based in London, he recalls one breathtaking moment aboard a Nigerian airliner in one of his travels to that country in 1972:

I boarded the plane and the entire crew was black. Both the captain and the 1<sup>st</sup> Officer were Nigerian and my heart leapt. I grew inches with pride at this realisation that they contradicted all that apartheid South Africa asserted about blacks.

Then, as though to confute his earlier claims of positive racial consciousness antithetical to frames of apartheid thinking, he recalls, with resentment, how he later acquiesced to the white dominant frames on blackness:

We took off smoothly, but sometime later we hit turbulence. Wow! It was scary... .  
[Referring to what he calls conditioning, he further narrates... .] You know, one time you are up there, and then, bump, the aeroplane descends and you leave your stomach on the ceiling. To this day, I am shocked at what happened. I really did not know about the power of conditioning. I got quite scared because I said: “Hey! There is no white man in the cockpit. Will these blacks be able to land us safely”? Can you believe it! (Tutu, 2006)

Respected black scholar Allison (2008) cites work by Cross (1971) in her explorative study of communication strategies employed by black members of academic staff<sup>78</sup> at predominantly white institutions of higher learning. Here, Allison postulates a typology of 'doing' and 'thinking race'. She contends that there are three phases of black identity negotiation and these are pre-encounter, encounter, and internalisation. In pre-encounter whites are necessarily the primary reference group for blacks. Blacks tend to idealise whiteness and engender, to some extent, self-hate. During encounter, blacks meet whites at which point they encounter the meaning of being white vis-à-vis being black. Cross (1971) asserts that in that situation, blacks may start resenting or even hating whites. With internalisation, blacks foster within themselves a kind of black self-efficacy, independent of whites (and whiteness), while other blacks may even become their primary reference group. Struggle icon, Nelson Mandela, had similar experiences as those articulated in Allison (2008). When recounting events during his welcoming ceremony back into the royal kraal from the initiation school, the young Mandela recounts a speech made by the respected Xhosa chief, the eminent Chief Meligqili. Apparently, the chief had sent the whole royal crowd into a lull by preaching against white supremacy and the harrowing condition of blacks at the hands of the white man. Mandela explains:

The audience had become more and more quiet as Chief Meligqili spoke and, I think, more and more angry. No-one wanted to hear the words that he spoke that day. I know that I myself did not want to hear them. I was cross rather than aroused by the chief's remarks, dismissing his words as the abusive comments by an ignorant man who was unable to appreciate the value of the education and benefits that the white man had brought to our country. At the time, I looked on the white man not as oppressor but as a benefactor, and I thought the chief was being enormously ungrateful (1994:35).

Like the Nobel laureates Nelson Mandela and Archbishop Desmond Tutu, this researcher's upbringing had cast whiteness as something benign, pure, and almost beyond reproach. It has been something to which to aspire, as if for him it was the highest state of being. Thus, whiteness personified what it meant to be fully human. Therefore, whiteness has been his primary mode of reference in making sense of my own social reality as a young black South

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<sup>78</sup> In the US, the reference is 'faculty', meaning academic staff.

African male growing up under apartheid. With the effects of encounter and later internalisation, this researcher has sought to oscillate between this triangle – with no one definite point of destiny to any of three phases in Allison’s typology (as cited from Cross, 1971). Thus, as the researcher, he relates to, thinks about, and is actively involved in doing ‘doing’ race. He is aware of the complexities and contradictions relating to this complex ‘race’. In this regard, he does not claim to be an uninterested observer on a mission to finding the truth, the whole truth, and nothing but the truth – personally detached from the research endeavour. This, however, need not suggest that he is ignorant of the cardinal requirement that some critical distance is also required.

### **5.5 Case Study Research**

A case study is an intensive investigation of a single unit (Handel, 1991; Runyan 1982; Yin, 1994, cited in Babbie and Mouton, 2004:281). The unit in this study is the University of Cape Town’s Faculty of Health Sciences (UCT FHS). While quantification of data [may] not be a priority in a case study (Hammersley and Gomm, 2000), ‘the interaction of the unit of study with its context is a significant part of the investigation’ (Babbie and Mouton, 2004:281). Case study methods are often best suited for studies on race (Raez, 1998). A case study offers a deeper understanding and lays bare particularities of the specific object being studied which may unwittingly be blurred when one is presented with multiple objects for study. In this instance, while the specific findings may not be readily generalised, the thick descriptions and the focus on specificities of the case, that is, looking at the particular case as one of its kind (its social and political context notwithstanding) the level of detail in multilayered interpretations more than compensate for the charge of non-generalisability. However, as the data will show, historical and social context assisted this researcher towards the generalisability of the findings, given the striking harmony between the latter and the former (that is, between the socio-historical context, on the one hand, and research data on the other).

Further, a case study is a research strategy that seeks to examine a contemporary phenomenon in its real life context (Yin, 1981:59). Yin presents three typologies of case study research design namely exploratory, descriptive, and explanatory (1981:59). Tellis (1997) posits a similar logic to what Yin had earlier proposed when he asserts that a case study research is embedded in three main tenets of qualitative research methodology, i.e. describing, understanding, and explaining. This research into the experience of blackness in a predominantly white environment, therefore, sought to both offer thick descriptions as well as

explanations of the social mechanics of that experience. Baharein and Noor (2008:1602) counselled that ‘a case study is not intended as a study of the entire organisation...it is intended to focus on a particular issue, feature or unit of analysis’. Suffice it to say, therefore, that this research is a single case inquiry into the University of Cape Town’s Faculty of Health Sciences (rather than the whole institution) in relation to the core issue of ‘race’. In this investigation, black registrars and white academic members of staff are the sampling units of analysis. In other words, the University of Cape Town’s Faculty of Health Sciences is the single case under investigation (the requirement of a case study research), while the white members of the academic staff and black registrars represent units of analysis within this case.

This researcher wishes to emphasise that since the study is based on a single case, it is quite possible that had a different cohort and / or group of black registrars and white academic members of staff been interviewed, perhaps the experience accounted for in the thesis could have been different. However, this is only pure speculation as the researcher is unable to empirically ascertain this. Another study in the future is, perhaps, warranted so as to test this. Accordingly, this researcher has been careful not to propound any generalisations as a result of the findings of this study. It is further conceded that since the total population of black registrars at the time stood at 43, of which only 20 participated, it is not inconceivable that had the non-interviewees also been part of the study, a different result might have, perhaps, been possible. However, it is not possible for this researcher to confirm this, only a follow-up study can empirically confirm or disprove this supposition.

#### ***5.5.1 The Choice of the Case (the UCT Faculty of Health Sciences)***

The University of Cape Town’s Faculty of Health Sciences is a predominantly white establishment situated in one of South Africa’s biggest metropolitan centres. As has been shown already in the previous chapters, it has, however, a growing black student population compared to the static numbers of blacks in its academic staff profile. The researcher chose the site for strategic and practical purposes. Firstly, the medical school and the University’s history as a hotbed of white liberal anti-apartheid effort made it an ideal strategic site to investigate, given its supposed ‘progressive’ credentials. In that context, therefore, the researcher sought to illuminate the point as to just how far the Medical School’s loci have become ‘homes’ of the very social group (blacks) for whose rights it ostensibly fought during

apartheid. Secondly, the Medical School is surrounded by a host city whose demographic profile barely resembles the broader national demographic profile.

In pursuance of the geopolitical context in the preceding paragraph, it might be worthwhile to quickly glance at some of the relevant population statistics. There are more people classified as whites and coloureds in this area than there are blacks, while blacks constitute 79.5% of the national population count (StatsSA, 2009). The Western Cape province, for example, recorded a total of 1.2 million blacks compared to 2.4 million Coloureds in the 2001 population census (StatsSA, 2001). The researcher uses the official census data of 2001, which is by far the most reliable. An official census will, however, be conducted in 2011 from which new population statistics will be drawn. While blacks are markedly fewer in number in the Western Cape compared with the rest of the country, it is appropriate to note that there has, however, been a steady increase in the black population as more blacks, particularly from the Eastern Cape province of South Africa, migrate into the Western Cape in search of job opportunities and a better life. For instance, the 1996 census indicate that there were only 826 691 blacks in the Western Cape compared with the 2001 census that pegged the number at 1 207 429 (StatsSA, 2001).

Lastly, the researcher chose the site on practical grounds. The Faculty of Health Sciences, for example, has an Equity and Transformation Office through which this research effort was to be administratively supported. Unlike other faculties at the University, the Faculty of Health Sciences boasts an Equity and Transformation Portfolio, with an administrative hub, and was overseen by a senior professor in the Faculty from 1998 - 2007. The portfolio had over many years built an enviable data bank on a plethora of institutional matters relating to the change effort in general in the Faculty, and in particular, how race mediates or intermittently disrupts, blurs, or minimises noble human efforts towards a changed University of Cape Town that will, among others, be inclusive, welcoming, supportive and nurturing.

### ***5.5.2 Research Population (Black Registrars and White Academic Staff)***

#### ***5.5.2 (a) Unit of Analysis: The Black Registrars***

Registrars are qualified physicians who, after completing their basic medical degree which in South Africa, is called the Bachelor of Medicine and Bachelor of Surgery (MB ChB) and the mandatory two-year internship and one year of community service (and often after a number of years working as doctors in either the public or private health sector) have made the choice

to specialise further. Some come back to the Health Sciences Faculty at UCT for specialist training that usually takes four years in a specialist area of their choosing, e.g. orthopaedics, forensic pathology, paediatrics, etc. Thus, registrars are postgraduate trainees in medical specialities (in the US and Europe they are known as residents) and according to London, Kalula and Xaba (2009):

Registrar training<sup>79</sup> involves a structured program of clinical apprenticeship and formal learning which typically takes between 4 and 6 years to complete, depending on the discipline. During this period, they are registered as postgraduate students with the university, but work fulltime delivering care in the [public] health services, whilst gaining clinical skills under supervision of senior [medical] staff.

At the time of gathering data there were approximately 350 registrars, including 43 black registrars of whom only 20 agreed to take part in the study and were, therefore, interviewed. All registrars except one had worked as Medical Officers for a minimum of 5 years before commencing with their specialist training at the University. The one registrar who had had no experience and an entry level occupation in medicine had only completed the mandatory two years of internship and one year of community service before coming to the University to specialise.

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<sup>79</sup> Again, see <http://www.biomedcentral.com/1472-6920/9/26> [Online].

**Figure 6: Black Medical Registrars** <sup>80</sup>

Respondent	Gender	Speciality
Dr Ratshitanga	Male	Large Clinical Department
Dr Soni	Female	Large Clinical Department
Dr Mzobe	Female	Small Clinical Department
Dr Motaung	Male	Large Clinical Department
Dr Magagula	Male	Large Clinical Department
Dr Mangope	Female	Small Clinical Department
Dr Mxenge	Male	Small Clinical Department
Dr Ramokgopa	Female	Large Clinical Department
Dr Skwatsha	Male	Large Clinical Department
Dr Satyo	Male	Large Clinical Department
Dr Baloyi	Male	Large Clinical Department
Dr Ledwaba	Male	Large Clinical Department
Dr Leballo	Male	Small Clinical Department
Dr Leballo	Female	Small Clinical Department
Dr Kgosi	Female	Large Clinical Department
Dr Sotonga	Male	Small Clinical Department
Dr Bam	Male	Large Clinical Department
Dr Tanga	Female	Small Clinical Department
Dr Sobahle	Male	Large Clinical Department
Dr Baratang	Female	Large Clinical Department

Initially, this researcher had included in the thesis, the specific medical specialities against each registrar in the sample. However, on further advice about research ethics, they decided against this as it became most apparent that some of the identities of the actual respondents may be unwittingly compromised. This danger was particularly more real for those specialities like dermatology, forensic pathology, and psychiatry where blacks were very few in number – thus making it easier to uncover the respondents real identities. As a result, it was decided that there be a heuristic that one can employ without necessarily compromising the anonymity of the respondents in the study. Accordingly, the researcher came up with the idea of organising the specialities into two main groups, hence the small and large clinical department distinction as shown in *Figure 6*. In the registrar sample, large clinical department include Surgery, Internal Medicine, Obstetrics and Gynaecology, Anaesthetics, Radiology and Orthopaedics. The small clinical departments on the other hand include disciplines such as Public Health, Dermatology, Forensic Pathology and Psychiatry.

Registrar training may involve a broader field of knowledge (speciality) and specific sub-specialities within these broad areas. For example, while internal medicine may be a broad area of specialisation, the registrar might simultaneously be expected to go through specific

<sup>80</sup> All names used are pseudonyms to protect the real identities of the informants.



sub-specialities within internal medicine, for example, in the areas of cardiology, liver, and lung medicine. While there was a wide spread of specialist fields represented on the sample, it is interesting to note that at least a quarter of the respondents were from surgical fields, including general surgery and orthopaedics. The researcher singles out surgery because of its racialised and gendered constructions (Mindel, 2003; Brier and Wildschut, 2006b). While he concedes that statistical inferences cannot be generalised, given the small sample, nonetheless it is apposite to note that all of the five registrars who are in surgical fields are men. This is in line with national and international trends.

At least half of the respondents had completed their Part I examination and were on the last phase of their specialist training, with some to write Part II (final) examinations in less than twelve months. This is important in terms of sifting their lived experience in the Faculty, given their relative seniority compared with the others. About half of the registrars had attained their initial medical training at the University of Cape Town – the total count here was nine out of 20. Fittingly, the rest were mainly from the historically black medical schools, the majority of whom graduated from the Medical University of Southern Africa (MEDUNSA), and the rest thereafter, from the University of Natal Medical School (now the Nelson Mandela School of Medicine, part of the University of KwaZulu-Natal), save to mention, however, that there was one exception from the Walter Sisulu University Medical School (formerly, the University of Transkei Medical School). Bearing testimony to South Africa's racist past, none of the 20 registrars (apart from nine who were educated at UCT) interviewed had received their initial medical training from the other historically white medical schools (Universities of the Witwatersrand, Pretoria, Free State and Stellenbosch).

For the purpose of this research, it was also important to note that those who attained their initial medical training at the UCT FHS were in the majority. In other words, there were more UCT FHS alumnae than from other institutions. Out of a total of 20 that took part in the study, nine were UCT FHS alumnae. For the purpose of this research, this too was important, as it promised to illuminate a deeper experience over an extended period of time with the institution. That is, the long seven years of their initial medical training promised to give them a perspective lens through which to articulate their current experience with the institution as medical registrars.

This researcher made the choice of black medical registrars advisedly, with the parallel focus on white academic members of staff to emphasise apparent contrasts. As explained in the Introduction Chapter, the white academic members of staff as standard bearers and ‘representatives’ of the white population at the University are brought in to assist the research in situating blackness, i.e., in giving blackness at the University of Cape Town a context. That is, since the point was to decipher the black experience in a predominantly white academe, the researcher deemed it important that this very whiteness itself be decoded in terms of thought and feel. On the main, this was a logical choice since the study sought to illuminate the experiences of blacks in an academy that is predominantly white, and therefore, white self reports were critical. The subjective experience of a black life within a predominantly white English milieu could only be better relayed by those who experience it, i.e. the black subjects themselves. The researcher would have preferred to also include black academic members of staff in this study but has had to abandon this as there were very few black members of the academic staff in the Faculty. Moreover, the researcher was satisfied that the 20 in-depth interviews with black registrars in the Faculty of Health Sciences were sufficient to give some account of the totality of black experience in the Faculty.

### ***5.5.2 (b) Unit of Analysis: White Academic Members of Staff***

***Figure 7: White academic staff***

<b>Respondent</b>	<b>Gender</b>	<b>Academic Rank</b>
Paul-Gibson	Male	Associate Professor
Maritz	Male	Professor
Groenewald	Female	Associate Professor
McKinnon	Female	Associate Professor
Rosenthal	Male	Professor

Apart from black registrars, the research population also included white academic members of staff. As explained in earlier sections, while this research is about foregrounding the black voice and experience and not about whiteness per se, it was important, however, for the purpose of this research, to situate that black voice and experience within a particular social context. Since whiteness provides the social environment within which the black voice and experience is situated, it was only logical that its mechanisations be made more visible, not just through the black voice but also through its own constructions. While the white group in this research is small, and of course, a larger sample of the white group would have been preferred, this researcher is confident that nevertheless, rich data did surface and assisted in

sifting out discernable patterns, and some more nuanced white positionalities. That notwithstanding, for the purpose of this study, the section on white academic members of staff has been taken as a pilot, with the intention to further explore, in the future, with more depth and breadth, whiteness in the academy as a dominant, normative and invisible phenomenon.

A total of 5 in-depth interviews were conducted with academic staff during 2006 and early 2007. While the Faculty of Health Sciences is predominantly white, as is the University of Cape Town, only a few white academic staff responded to the call to take part in the study. About 40 white members of the academic staff were given information about the study via email, some with follow-up telephone calls. Of these 40 only five responded positively to the request for a full in-depth interview. While this figure is very small, it was sufficient for the purpose of this study. As explained in the introductory chapter, the object of the study was not about whiteness but rather about the black academic experience within the context of registrar training (in which white academic principals play a key role).

### ***5.5.3 In-Depth Interviews***

In-depth interviews were used as the primary instrument in the gathering of data. In-depth interviews were preferred for this type of research as it was about decoding experience from out of the respondents' own words, feelings, and thoughts. While other methods were available, such as surveys, they will have been limiting in terms of their utility, considering the type of research. The researcher also kept a research journal in which he captured his impressions after each interview was conducted. This also provided him room for debriefing and self-reflection. Both proved to be intricate and complex processes. While debriefing afforded the researcher with the opportunity to detach from the research itself, self-reflection as an exercise demonstrated almost always how the researcher, as a racialised subject himself, formed an integral part of the meaning-making endeavour.

All interviews were tape recorded. This researcher transcribed all audio tape material. As part of the analytical process, it was important that this be carried out by the researcher. It brought him closer to the data, and thus, enhanced familiarity. Interviews ranged from 30 minutes to an hour, while some stretched into two (2) hours depending on the nature of responses registrars gave, the maximum permissible time they could spare for the interview (given that some could only have the interviews while they were also on call in the hospital). Since most

registrars do not have private office space as they spend most of their time in the associated academic hospitals, the majority of the interviews were conducted in public spaces such as restaurants, coffee shops and cafeterias while some were conducted in the comfort of the registrars' own homes. With regard to white academic staff, all interviews were conducted in their offices in the Faculty of Health Sciences.

The interview guide had two main sections. The first section attempts to tease out the respondents' own background in terms of family, school, and the community while the second section deals directly with how they experienced the Faculty of Health Sciences from about the time they were recruited into the institution to their current position as registrars and academics respectively. While there were slight variations in the interview schedule between black registrars and white academic members of staff given the differences in terms of the recruitment route as well as in terms of the roles and responsibilities, the differences in terms of the guide questions were not material (see Appendix 1 and Appendix 2).

#### ***5.5.4 Qualitative Data Analysis***

The analytical process began with close reading of the transcripts in order to find out if there were, even at this early stage, any discernable trends to note. Analysis included a total of 25 transcriptions i.e. 20 of interviews with black registrars, and five of white academic staff. The researcher started with a close reading of the data. The close reading of transcripts is important as it allows the researcher to have a feel for the spirit of the text (De Wet and Erasmus, 2005). Then open coding began where broad categories were extrapolated. The open coding referred to involved examining words, phrases, lines, and paragraphs of the transcripts to discover and name the concepts expressed by subjects in the study (Rogan et al., 2004:219). Having deduced these three broad categories (or narratives) the researcher extrapolated from them sub-categories, or axial codes. This process involves developing the categories further by looking for relationships between each broad category (narrative) and its sub-concepts, subcategories (Rogan et al., 2004:219).

The process of coding data unfolded principally on three levels. Firstly, the broad categories seemed to emerge while the researcher was continuing with the interviews. For instance, as far as the black registrars were concerned, after a quarter of the interviews, it became clear that there was not going to be one grand narrative that could sufficiently account for the black registrar experience. Instead, three narratives seemed to emerge. With the completion of the

interview process the researcher then read and reread the interview transcripts and confirmed the existence of three broad narratives. In order to ensure that the researcher familiarises and thus internalises the research data, all the interviews were transcribed by him, as has been explained already. This process took at least seven hours per tape per interview. The second level of analysis involved constructing categories and subcategories from the three narratives. That is, in general the categories and subcategories reproduced themselves for all the three narratives. Similarly, the analysis of white academic respondents followed a similar procedure to the black registrar data.

In the initial stages of data analysis, this researcher agonised about the apparent feelings of not just discontent, anger, and resentment, but also of powerlessness, augmented by a feeling which seemed almost melancholic. How so, he asked, that such an elite and exclusive group of generously talented blacks (for it is only a select few that gain entry into the medical school, let alone be selected for a place in one's chosen field of speciality) could ever find itself in such a precarious state, or even perceive itself not to matter? It was only in the second phase of close and repeated reading of the data that other paralleling this melancholy emerged. The actual reading of transcripts took place while the researcher was away on a visiting scholar programme at an American university. In a research activity such as this (where a many emotions could be generated) such a sojourn, nestled far away from the day-to-day reminders and irritations not uncommon within the research site in question, does have benefits, as also aptly articulated in Steyn (2001).

Unlike the first phase of close reading, the second phase enabled this researcher to peruse critical data, to sift contradictions in the respondents' explanations of their lived experiences and perceptions of their environment. Then finally, in data reduction, the researcher introduced selective coding where he integrated categories and sub-categories into an overarching framework. In other words, to further make sense of the data, the researcher bound the sea of categories and subcategories into three key phenomena. This turned out to be a circular process as it returned me to those early three broad categories deduced from the close reading of data in the preliminary stages of data analysis. Put another way, three core narratives on which the actual presentation of data would be based were reinforced by the selective coding process. The narratives are, of course, understood in the context of the white sense of place (as will be demonstrated in Chapter Seven on white academic members of staff). That is, each narrative delves into themes constructed out of the data to account to the

totality of the experience of the registrars in the 20 member sample. The key black registrar narratives, on which the next chapter is based, are therefore summarised below as:

- Race is everything and everywhere: ‘Everybody just wants to run away’;
- Surviving navigators: ‘This isn’t theirs [only], I also deserve to be here’; and
- Plain sailing navigators: ‘Racism! I don’t know what you guys are talking about’.

#### ***5.5.5 Ethics Appraisal***

There is a standard ethics procedure in the Faculty of Health Sciences which obliges all prospective researchers in the Faculty to make an application for ethics appraisal to either the Faculty’s Human Research Ethics Committee or the Animal Research Ethics Committee. Given that this research was on human subjects (black registrars and senior white academic members of staff), an application was made to the Faculty’s Human Research Ethics Committee, which duly granted approval to the project. This researcher also received a positive ethics appraisal from the Faculty of Humanities. Given the sensitive nature of the topic, the researcher made the undertaking to all the respondents that all data gathered shall be used solely for the purpose of the research and that actual identities of respondents will be at all times protected. In a bid to further protect the identities of respondents, this researcher elected not to volunteer actual medical specialities of the registrars and academic members of staff. This researcher is thus satisfied that all ethical considerations have been satisfied in respect of this study.

## CHAPTER SIX

### **Black Registrars and White Environs: At Home and Not at Home**

#### **6.1 Introduction to Chapter Six**

Following on the previous chapter, data are presented here under the rubric of the three grand narratives that emerged from the coding process referred to (in the preceding chapter). That is, the chapter will expound on the three narratives in accounting for black registrars' life experience at University of Cape Town's Faculty of Health Sciences (UCT FHS) and its associated academic hospitals.

As has been explained earlier under Methodology, this chapter will demonstrate that the conversation<sup>81</sup> with black registrars was predicated, in the first instance, on the respondents' own backgrounds, which included familial and schooling backgrounds. Thus, each narrative gives a particular account of school and familial background, surmising their utility in terms of how the registrars made sense of their social reality at the University of Cape Town's Faculty of Health Sciences (UCT FHS) and its associated academic hospitals.

The chapter begins by exploring the first narrative entitled 'race is everything and everywhere'. For this subset of the sample, there is an exceedingly high level of discontent, and black registrars articulate their feeling of not belonging as a consequence of their race. There is no commitment to, or affinity with, the Faculty and its associated hospitals, with the presumed utility of obtaining the specialist qualification as the only incentive to endure the wrath of whiteness. The chapter then proceeds to a second narrative, which is not that dissimilar to the first, except that registrars here articulate their role as change agents, hence the daring act of staking a claim to what the environment has to offer to whites, as they proclaim that they too 'deserve to be here'. The researcher elected to name this subset 'surviving navigators'. The third narrative (plain sailing navigators) foregrounds colour-blindness. The researcher demonstrates that the claim to be colour-blind is aspirational, as opposed to something rooted in social reality, since it is not very likely that anyone is colour-blind, given the centrality of race in South Africa's socio-historiography. Notwithstanding the colour-blind claim, even in the articulation of their own experience, 'colour-blind' black

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<sup>81</sup> The researcher prefers to use conversation in the place of a typical interview as this captures accurately the nature and spirit of the encounter and engagement. Although there was a semi-structured 'interview' schedule, the encounter essentially was about the respondents to relate their experience at the UCT FHS in the manner they saw fit.

registrars fail the test as they usually make inferences to race to explain failures of ‘other’ blacks. In conclusion, the chapter demonstrates the enduring significance of race to current social relations suggesting, therefore, that the legacy of colonialism and apartheid still linger. The three narratives suggest broad categories into which this researcher segmented data. This data segmentation need not suggest in any way, a neat, clinical, and unproblematic research process since, in some places, there were often contradictions and ambiguities. Such ambiguities and contradictions will be more self-evident in the presentation of data in the later sections of this chapter.

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## CHAPTER SIX: PART ONE (Narrative One)

### Race is Everything and Everywhere: ‘Everybody [black registrars] Just Wants to Run Away [from the Medical School]’

#### 6.1 Introduction to Part One (Narrative One)

Respondents in Narrative One represent what the researcher refers to as the harrowing condition of blackness. That is, it is a group of black registrars at UCT Medical School who see their lived experience as being mediated by race and racism, and are merely just holding out to what they see as the wrath of whiteness. As a result of the unsavoury experience, principally on account of their race, these registrars have little ambition of staying in the academy as future members of academic staff. As shall be demonstrated, however, there are other extraneous factors outside the race prism that also militate against an academic career.

*Figure 8: The First Narrative on Black Registrars*

Name <sup>82</sup>	Schooling	Gender	MBChB*
Dr Ratshitanga	Former DET	Male	HWMS <sup>83</sup>
Dr Bam	Former DET	Male	HBMS <sup>84</sup>
Dr Mxenge	Former Model C	Male	UCT FHS
Dr Baratang	Former Model C	Female	UCT FHS
Dr Skwatsha	Former Model C	Male	UCT FHS

#### 6.2 The Intersection between the Family (Community) and Schooling

It was nice. I enjoyed my school. I enjoyed a lot of things ko sekolong [at school]. Okay, let me say initially, you know when we were still young, we were not into studies but I used to do my bit. And from Standard 6 [Grade 8 – first year of high school], I started working. I got a patient teacher who gave me all the tricks – how to study – how to practice math. From then on, things just started going very smoothly for me at high school. I really enjoyed studying. I can’t bore you much with the details – yes, I had a lot of friends. It was a nice environment for me [Dr Baratang].

Coming as she did from a privileged schooling background, Dr Baratang enjoyed every aspect of her schooling. She intimated, somewhere in the interview, that while the school she attended [the high school] was predominantly black in terms of the learner population (owing to most whites taking flight from the former Model C schools at the start of school

<sup>82</sup> The reader is again reminded that all names are pseudonyms as all care had to be taken to protect the real identities of the respondents.

<sup>83</sup> HWMS denotes a Historically White Medical School.

<sup>84</sup> HBMS denotes a Historically Black Medical School.

desegregation) the teaching staff was predominantly white (a salient phenomenon in the post-apartheid public schooling landscape) as it is the case with most of the former Model C schools. She strongly articulated how both personal agency and extraneous factors outside the locus of one's control can contribute to an experience which is either positive or negative, and in her experience, she was able to muster to have a positive schooling experience. However, despite the fact that she was predisposed to the white milieu (and its idiosyncrasies) for a variety of reasons, mostly bordering on her blackness, such predisposition still did not place her in a good position to claim a sense of home (of belonging) to the UCT FHS.

Dr Mxenge, below, had a similar privileged schooling experience (in his case from early on in his schooling, i.e. from primary school through to high school). His positive schooling experience was on account of his own agency and a combination of other extraneous factors, such as institutional support in terms of the teaching staff at school and so on (as was, for example, the experience with Dr Baratang). However, he stated, below that, despite this:

My early years in school – well, for some reason I did not enjoy them. I don't have any good memories of them. Probably when I begun Standard 2 [Grade 4 – part of the intermediate phase at primary school] or so, I was beginning to enjoy school and then it never stopped, but the first two years of school were very confusing for me – I never knew what was going on. I didn't know what I was supposed to do. I think it is because I never went to a pre-school, so I was not prepared for schooling at all. So, I think it was a bit of a shock to my system, but yes, I had good years of schooling. I think I got connected with the right guys early on and we were very committed to schooling and we have been together ever since [Dr Mxenge].

Comparing schooling and presupposing the intersectionality between these two foremost institutions of society, another interviewee, Dr Bam, said that in his case neither one appeared to be predominant. In the end, however, he acknowledged that the family rather than the school had the greatest influence on the choices he had made and in whom he has become. From the data presented, it is not clear whether his positive experience in respect of his schooling had anything to do with it being 'underprivileged' as a former DET institution. On intersectionality and more leanings towards the family than the school, he explains that:

Eh – I don't think that it would just be high school. It is your parents, it is your high school, it is everything. But definitely the schools do give you the tools to get into the tertiary institution. They give you the math and so forth that are needed for entry [Dr Bam].

As has been demonstrated, schooling is important and it is seen to have contributed somewhat to the paths the registrars in this narrative chose, irrespective of the schooling type, whether privileged (former Model C type) or underprivileged (former DET type). Most salient in the data, however, was the evident influence and guidance from family members, as is exemplified in the following responses by two registrars:

My brother who was a teacher insisted and organised application forms and everything. I arrived there [at the university] and in two days I had changed [from medicine to engineering]. Somehow he found out and I was in trouble. So I went back to medicine [Dr Ratshitanga].

My parents were teachers and they used to say: Oh no! You can't be like us, and be poor etc. As I was growing, people used to say: Oh! Clever boy! He's gonna be a doctor. So you never really chose it on your own. Those voices around you have a major influence in the choices you make. So, it was like this career has been chosen for me ... It was just for me to come along [Dr Bam].

Similarly, Dr Mxenge added:

When you grow up, you have a lot of ideas either from TV, in the community, what you hear from people and you develop thoughts. In the past, if you showed potential, you'd be told that you'd be a lawyer, teacher, or doctor. You know, stuff like that. All those things contribute to what you end up becoming. It was one of those things everyone would tell me – that is, that [I] should become a doctor [Dr Mxenge].

The seeming 'forced' choice of medicine in Dr Ratshitanga's case could be understood twofold. First, outside of teaching and nursing, medicine and law are revered careers in the black communities since there are very few persons qualified in these fields. Compared with engineering and careers in the financial sector, medicine and law are seen as being less remote – thus most ordinary blacks can relate to these careers while such familiarity does not readily exist in respect of careers in engineering, commerce, science and technology. Further, the forced choice of medicine as opposed to engineering could be understood within the broader social engineering project of apartheid which, by law, prescribed careers for blacks, and designated most of the lucrative careers as the exclusive preserve of whites. For example,

at the height of apartheid, careers in engineering were not readily open to blacks while medicine was, except that blacks could only attain medical training at specific institutions designated for that purpose, i.e. the training of black doctors. Dr Ratshitanga was the first in his village to study medicine, but by the time he was nearing the completion of his studies, the community had made great strides in that a further two of its own were also studying medicine, following on Ratshitanga's lead.

While in the case of Dr Ratshitanga, the immediate family clearly played a pivotal role in dispensing of its resources (brother's time, money, knowledge), the responses from his contemporaries, (Drs Bam and Mxenge), while underscoring the centrality of the family in its narrow sense, also foreground the complimentary role of the 'community' which, in a sense, tended to also play a role consonant with that of the family. Therefore, rather than being a linear familial process, the gravitation towards a professional field is a complex social process involving multiple social actors (and institutions) at different levels of the social chain.

However, family guidance need not only be 'positive', that is, attuning its members towards those occupational professional roles perceived to catapult them into higher rungs in the social hierarchy. Of the most clear of responses in this way in accounting for one's family role is Dr Baratang's below:

My mom really discouraged me from being a doctor. She is a nurse and she said you won't have a life. She had seen other doctors how they were living their lives. She knows. Even for her, during most of the [public] holidays, she won't be there [at home] whereas people who were teachers had time for their families [Dr Baratang].

Dr Baratang came from a family of petit bourgeois blacks as did Drs Bam, Mxenge and Skwatsha. There is medical genealogy running through the family (both immediate and extended). Here, her mother, for example, is a nurse, and interestingly, persuaded her against medicine because of its unpleasant working conditions, which, in her considered opinion, impinge on family life. She has an uncle who is a doctor (although she concedes that she has not had much contact with him) and another who is a nurse.

Narrative One registrars registered the highest level of discontent (as the data will later show), yet their unsatisfactory experiences could not be linked to their schooling type or familial circumstances. That is, it did not seem to matter whether or not one had a privileged schooling and family background in view of the discontent. In that respect, even predisposition to white schooling milieus did not seem to act as an assistive buffer against unsavory experience as a registrar (as will be pointed out by data in the later sections of this narrative). At the very best, however, registrars seemed to overstate the efficacy of the family (and community) in terms of preparing for and guiding them to the choices they ultimately had to make about their careers. It is interesting to note, however, that in this group of five registrars in Narrative One, three of them received their undergraduate training (MB ChB) at UCT FHS, meaning they will have been predisposed to this white milieu for at least six years prior to coming back as trainee medical specialists.

### **6.3 Existing Internal Networks at Point of Entry**

The main purpose of probing networks was to ascertain the various ways through which the entry of black registrars was facilitated at UCT FHS. The mechanisms through which registrars gained entry are important to understand as these may well explain how they would be ultimately received and accepted and, thus, the extent to which they feel at home. For example, it is plausible to suggest that those that were headhunted (actively recruited) may, in all likelihood, have had a more receptive welcome at entry compared with those who went the normal route of fierce contest and the agony of being wait-listed. Thus, it is possible that for the former, the hosts may have felt duty-bound to provide a warm reception, while those that had 'invited themselves' may have found the environment more challenging, owing to the apparent absence of enthusiastic hosts. A fundamental claim of social capital [which is embodied in human networks] is that the characteristics and resources of friends, contacts, and groups may affect individual outcomes (Mouw, 2006:82). This then begs the question: Was there necessarily a causal link between the registrars' social networks (internal) and the outcomes (how they, as blacks, experience the working environment)?

All the 5 respondents in the narrative reported to have had no benefit of an active middleman, playing either a formal or informal facilitative role. A formal facilitative role would normally be vested in those with authority, i.e. the key decision makers, whereas the informal facilitative role may be vested in persons who are outside the formal sphere of authority, but who are, nonetheless, well-placed to influence decision makers. In the case of the registrars,

these may be senior consultants, who, although not within the employ of the UCT FHS, can influence or sway a head of department to make certain considerations (decisions). Departmental administrative personnel, like administrative managers, officers, assistants, secretaries and receptionists, may also play a pivotal role in that respect. That is, they can either function as an informal social resource that a respective registrar can employ, or else be loathed gatekeepers.

When the respondents were asked if they had known anyone (either in the academic department or the hospital) to whom they would have communicated their desires and intentions regarding further training at UCT FHS, the following response, below, typifies the many other comments from this cohort:

I knew nobody here. They [UCT FHS] had my application and when they heard that I was desperate to start, they said that I can come down here, but I was coming into an ordinary Medical Officer position to provide cover either here [at the main academic hospital] or in the satellite hospitals ... only with time was I allowed to join the system [registrar training] [Dr Ratshitanga].

Like the other respondents, Dr Ratshitanga had had no internal networks at the point of entry. However, unlike the others, he is not a medical graduate of the UCT FHS – perhaps intimating his apparent unfamiliarity with the UCT FHS social space. From another perspective, the data seem to refute the presupposition that lack of existing social networks for Dr Ratshitanga could be attributable to his evident unfamiliarity with the UCT FHS, since, after all, it was not his alma mater. For example, if the causal link bordered on unfamiliarity, then it should follow that the other four registrars in this narrative whose alma mater is UCT FHS should at least have boasted some kind of a social network given the evident length of their connection with the institution. In that regard, the comment below illustrates, in general, their ‘outsiderness’ (or estrangement) from the very beginning as they negotiated entry into the institution:

[While in the UK] I looked on the internet and I just applied. I called the department. I wrote an email to the Head of Department. So I just applied. I had no contact this side [at UCT FHS]. I just did everything myself [Dr Mxenge].

One female respondent, citing peculiar familial circumstances, explained her move to UCT FHS as a process, not so much premeditated, but one that was necessitated by other events in

her life. She self-assuredly declared that had it not been for these circumstances [which she volunteers below] she would definitely not have counted her alma mater (UCT FHS) as a place of choice for her specialist medical training:

My husband wanted to come back to Cape Town. I never wanted to come back to Cape Town. After finishing [completing the MB ChB degree at UCT] I had made up my mind that I will never be here. [On arrival in Cape Town] I worked in [...] department [*referring to her current specialist department*] as Medical Officer and I kind of liked it... 'The scope was big ... .Here you have a bigger scope and more complexity... . I was already in the department. It was much easier [to get into the registrar programme] [Dr Baratang].

The seemingly unflinching determination not to come back to UCT FHS for specialist training (only to be dictated to by circumstances) underscores the point illustrated by another UCT FHS graduate. Dr Mxenge concurred that, despite his long association with UCT FHS, he still did not conceive of it as his own. Thus, it is not surprising that Dr Baratang's entry could only be facilitated by her Medical Officer position in the specialist unit.

One of the more interesting points raised in the responses is a general distrust of the institution, in which two registrars seem to suspect the Faculty's motives in enrolling them for specialist medical training. The comments suggest a view that compliance and moral compulsion to accommodate blacks weighed more on the white establishment than the idea that talent and expertise needed to be harnessed from those sections of society previously excluded on the basis of their race:

I guess they [UCT FHS] wanted more blacks so as to colour [sic] the department. So it was easy at the time to come in. Even with the interview, it was something like: how are you doing? It was a bit of nothing. It really didn't go that deep. They just wanted to colour the department [Dr Ratshitanga].

Dr Mxenge added:

It was a numbers game. You are here because they [UCT FHS] were forced to have you here. It is not your space. I don't feel it is my space. I think most black guys don't feel it is their space. They are only here to get what they want to [the specialist medical qualification] and go. You are only here to qualify. Once that is sorted: get out! Get out and go and do your normal things [Dr Mxenge].

From the data, it is clear that none of the five registrars had the benefit of either formal or informal social networks that they could employ. That is, from the onset, there was no establishmentarian or anyone of some authority within the Faculty that had offered to take them by the hand. This may then partly explain this deep feeling of discontent – this lack of rootedness within the institution. This is in spite of the fact that at least three of the five registrars in the narrative are alumnae of the University of Cape Town. This lack of rootedness underscores the efficacy of social networks, as would be evident in the second and third narrative (both of which are to be presented later in the chapter).

#### **6.4 Social Interaction**

In weighing up social interaction within UCT FHS and the hospitals (which are an extension of the medical school as they are sites of experiential learning and clinical practice for the registrars) often registrars articulated the social environment and the clinical scientific environment as two worlds that were mutually exclusive of each other in which the former detracted from the latter. When probed about meeting points, opportunities for social interaction, and the temperament within which these were manifest, they sighed saying that ‘there is no time for social life here’, ‘you leave your personal life out of it’, and ‘it’s all just about work’. The work environment was not construed as something that which was social even though it is populated by active human agents. While they sought to water down the social aspect of their science, they did relate incidents of social interaction that suggested fissures in social relations between black and white registrars, between black registrars and white consultants and between black registrars and heads of department (HoDs) and/or divisional heads.<sup>85</sup> Overall, respondents felt that interaction mainly happened only when it was necessitated by circumstances when concerned parties had no choice but to communicate with each other. Examples given were if a registrar was working with a consultant (usually white, if not always) in the operating theatre, forcing both to communicate about their joint case at the operating table. In other words, unless practical considerations so dictated, black registrars rarely ever communicated with white consultants. Describing the temperament of social interaction between black registrars and white registrars and between them and white consultants, Dr Ratshitanga self-assuredly elaborated:

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<sup>85</sup> Heads of department are academic leaders in their respective departments, e.g. medicine. Divisions are those specialist units within a department headed by a senior specialist i.e. divisional head. For example, we can make reference to a division of dermatology (within the bigger Department of Medicine).



We do that [we communicate] but I can say social life is not the best [in the department]. I will not do it again if I was given the chance [to enroll as a registrar at UCT FHS]. It is usually about academic work when we meet with white colleagues. But for them, the white folks, I mean the white registrars and the white consultants, they do meet at a social level. On weekends you'd hear that they were out playing golf together. Who knows what else they talk about there. Maybe extra lessons take place there in the golf fields. And of course it would be difficult for us blacks to come in [into the golf course]. When it's us and them meeting, it's all about academic business. It is about academic work and nothing more [Dr Ratshitanga].

The respondent above conceded that social interaction is warranted, not so much in terms of blacks seeking affirmation or vetting from whites, but more so with regards to its utilitarian component. That is, there is recognition that it is during social interaction that valuable pieces of information on the complexities of certain intricate cases are shared. So, social interaction is never totally divorced from the whirlwind bustle of day-to-day clinical practice (an essential part of medical specialist training). In brief, the registrar here expresses the view that one's close proximity to one's peers (mainly white registrars) and superiors (mainly white consultants and senior consultants) may extend learning opportunities beyond the mandatory formal settings (a benefit, which so far, has only accrued to whites). However, while contact is valued, there seems to be questions as to the texture of its essence. That is, the circumstances, and the mode under which contact happens seems to privilege whites. Put differently, whites are the insiders, and therefore, the onus is always on the black registrars (as outsiders, as guests) to gravitate towards whites even though whites may (as is in the case of Dr Ratshitanga) be indifferent to such overtures. It therefore follows that even in the midst of 'contact', such effort is hardly sufficient enough to bridge the racial divisions:

We will arrange sports days or end of year functions in the department. You go there and you feel totally out. You are just the only black at the corner there! You can't even fit in one discussion. Sometimes they just break into Afrikaans<sup>86</sup> and you feel totally lost. You have to push yourself in there. It has to be you forcing yourself in, and they really don't care [Dr Ratshitanga].

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<sup>86</sup> The Afrikaans language contains a mixture of Dutch, English, and some French. It was first a dialect among the descendants of the early Dutch settlers in South Africa which was then steamrolled into a fully fledged language over time in competition with English which was seen by the Afrikaners as the language of the oppressor, with competition for supremacy between the British and the Boers (Afrikaners) culminating in the Anglo-Boer War. With the handing over of power to the Afrikaners by the British as part of the white peace pact in the post-war period, and the formal ascendance of Afrikaners to political power in 1948, the language Afrikaans was reinforced as a medium of instruction across all privately owned and state owned institutions. Black schools in particular were now compelled to use Afrikaans as the language of learning and teaching, leading to student nationwide revolts. For black people in general, the Afrikaans language has always been associated with white Afrikaner oppression, hence the distaste for the language.

One respondent in this narrative conceded that in his department there was valuable and freer interaction among registrars, but when asked if this was across the board, traversing the divisions of race, his response was negative. He decried the paucity of black bodies at registrar level as a contributing factor to the social chasm between black and white, as he elaborates below:

We do interact [in my department]. My department is very small. It will be difficult to compare it with other departments. We do meet with registrars from across the board, even with final year registrars [The researcher then asked: 'Does it happen across the racial divide, say between you and a white registrar colleague?'] [His response was most telling]. I would not say so. Blacks are very few here [Dr Skwatsha].

While Dr Skwatsha sought to rationalise the absence of social interaction between black and white registrars in his department in terms of the paucity of blacks against a critical mass of whites, it nonetheless remains unclear as to how successfully the small black numbers can alone make a dent on black/white social interaction. The most plausible of explanations to ponder would, in fact, be how Dr Skwatsha himself constructs whiteness. That is, 'normalising' it, placing it at the centre and as that which wields power. In that context, the extent and the success at which one would engage with whiteness would be contingent on one's group's state of organisation (and standing). The fewer the numbers of one's group, the lesser its impact in the face of the omnipresent white powerful insiders.

Following on the above (whiteness as the centre, and others having to seek to engage with it and not the other way round), the one female registrar respondent of the group made it plain that although interaction happens with white colleagues, it almost always places her in a subservient or second-class citizen role, as she explained:

You are treated differently. There is just something. You feel it all the time. You feel like you are second class citizen. You work with a consultant and after concluding a case, you go to the communal area to have a cup of tea. There is a tea club and we sit in the same room. When you are in there, you tend to see who really wants to see you out of the department [Dr Baratang].

Only one respondent, out of the total of five in this narrative showed little apprehension about the nature of the interaction across racial lines. Regarding social interaction in his department, he enthused thus:

We meet quite a lot. We meet every day. We have lunch meetings as well. In the mornings we meet – these are academic meetings. We also have our own workstations [cubicles] and we meet there [in the cubicles]. We work in groups. You hardly ever work alone. There is usually a minimum of two to three people that you work with [Dr Mxenge].

Unlike the other respondents, Dr Bam painted a picture of a social environment between black registrars and their white colleagues (and superiors) as that which seems extremely heterogeneous in that in some ways it was difficult to say that there is any hostility displayed by whites toward blacks. However, on other occasions, black registrars will face open hostility from whites. On this heterogeneity, the respondent commented thus:

The department is huge with many sub-speciality units. So you find some sub-specialities very nice and some very hostile. Some are very welcoming and some are very cruel. [And taking a deep breath, he continued] Oh God! But some are not that bad... In general, work-wise, things are okay. There is so much dedication and hard work [among colleagues] [Dr Bam].

In the main, interaction hardly ever occurred between black registrars and their white colleagues (white registrars and consultants). In cases where there was interaction, this happened not so much out of the goodwill of all concerned. Rather, black registrars felt it happened because circumstances so dictated. Black registrars in this narrative recounted flashes of hostility by white consultants on black registrars. In a bid to rationalise this hostility and strained social relations, black registrars sought to create some superficial distinction between the clinical environment and the social environment, with the former totally stripped of its social component. That is, in order for them to make sense of some of the open hostility towards them, some rationalised this as characteristic of the clinical environment which is by no means ‘social’ and operates on the ‘survival of the fittest mode’.

### **6.5 Dominant Culture, Traditions, and Symbols**

Respondents were asked to comment about what they may consider to be striking markers of a UCT FHS culture, its traditions and symbols (signage, artefacts, etc.) and whether collectively these represented and affirmed them as black registrars. Most respondents characterised the dominant institutional culture in terms of its white male English middle class outlook. In general, there was a sense among registrars that the cultural milieu bore very

little resemblance to them (black registrars), and thus reinforced a sense that they did not feel a part of the institution, as the comment below suggests:

It has been their territory for a long time. It would be difficult for them to accept new people to come with new styles and new ways of doing things ... .Because we cannot express ourselves well in English because it is their language. Sometimes you lack words to express things you want to say. Sometimes we do very well in the written exam but when you go to the oral, it is them who decide your fate [Dr Ratshitanga].

Dr Ratshitanga identifies the conflation of white cultural properties such as speech code/manner of speaking/accents with expertise or knowledge. It not only matters that one may have amassed the necessary technical competence, but also that one is culturally or symbolically competent. Here, speech code is the variable which symbolises to the establishmentarians whether a black registrar is technically competent or not. In this instance, one has to masterfully imbibe the dominant speech code as one's own to be considered knowledgeable and competent. This perception that one has to imbibe whiteness - and to act white to ease one's travails at the UCT FHS - is echoed by another black registrar, below, when making reference to the often unstated criteria in selecting students into the medical school:

The selection criteria are still skewed and tailored at selecting only those who would fit in the English and Eurocentric perspective. Even students who do not have that background [English and Eurocentric background], they feel alienated, and then have to adapt to the expected ways of doing things, of being. They therefore have to become one of them [they have to become white and act white]. [Dr Skwatsha].

The expectation by members of the dominant white group, to act or exhibit certain habits or behaviours explicitly foreground assumptions about what is the norm. That is, whites, given their dominant position at UCT FHS assume it as 'normal, commonsensical and natural for others to be expected to *'do things the way we do them here'* [my emphasis]. It is this assumption of 'normality' that grants whites the licence to admit conforming blacks into their ranks and to keep out those who do not exhibit aspirations to pass as white or to adapt to the white 'norm'.

## **6.6 Medico-Scientific Culture and its Supposed Innocence**

In a bid to rationalise their alienation, thus removing from it its racial tinge, some of these registrars sought to look at their clinical practice as a science which can be extricated from its humanistic element. In this way, they sought to draw a distinction between the science and the personal by advancing the idea that perhaps they feel the way they do because scientific environments are by nature harsh, empiricist, and results-driven and these factors were often not always contingent on one's race. That is, as one registrar put it, 'medics are very uncaring, especially to their own colleagues'. However, one respondent refuted the medico-scientific claim to explain alienation, as he argued:

Well, culture evolves. If one claims that medicine has got that culture, times have changed. You can't claim that because the line of duty is demanding, then people can be mean, and mean only to a certain section of the population. Why can't they be mean to everybody if it is just about the pressure of work and not about one's race [Dr Skwatsha].

Another registrar concurred:

You can tell when something like that happens. You can see it. You do find sometimes it's a racial thing. You will find that other consultants will not be forgiving for the things that you do wrong – they will harmer you. Or they don't care if you get them wrong because anyway, they are not interested in getting you competent [Dr Bam].

## **6.7 Institutional Support**

It is shown from the data that black registrars framed institutional support as it related to their peers (black and white registrars), consultants (who will mainly be white, if not exclusively so) and divisional heads and/or heads of department. There was very little mention of the role of the Dean (on whom executive authority over the UCT FHS is vested).

### ***6.7.1 Institutional Support: Heads of Department (HoDs) and/or Divisional Heads***

There existed very little trust between this group of black registrars and their respective heads of department, and in some cases, their divisional heads. In addition, they were fearful of not upsetting the authorities, even in the face of what black registrars might see as legitimate concerns, as one of the comments below aptly illustrates:

The Head of Department (HoD) has an open door-policy. [But] when we go there, we are careful not to complain too much because we feel we might be punished. They might want to make your life even more miserable, you know [Dr Ratshitanga].

The efficacy of white social networks was seen to be a major contributing factor in keeping blacks to their own with these networks almost completely shut from blacks. In this instance, white social networks within the institution were aggregated in the black imagination as a conspicuous monolith, not to be relied upon. The registrar, below commented on an incident in which she felt grossly aggrieved as she felt ignored by authorities, with her whole experience minimised in the process. During one of her ward rounds, she made a routine clinical error, and instead of resolving to work through the problem together with her, the white consultant unceremoniously ordered her out of the ward in the meanest of ways. That heads of department are not to be relied upon as a source of support is clearly evident, as the comment below illustrates:

The girl who is a friend of mine asked if I had been to the HoD [to lodge a complaint about the incident] about the harassment from the consultant. I said yes. She said it's not going to help because the HoD is the same as the consultant. You know, that really got me thinking. She [the white consultant] was told by the HoD to strike out the bad notes she had written about me on the patient's medical file, which she never did [Dr Baratang].

Support from heads of department (HoDs)/divisional heads/consultants was seen to be almost non-existent, so much so that there was an apparent lack of trust between this group of black registrars on the one hand, and their academic/ clinical immediate superiors on the other, who were almost always white. However, even in instances where some form of institutional support was evident, registrars still did not see this as a genuine heartfelt desire by whites to impart to them the necessary clinical skills. That is, even when a white olive branch was extended to black registrars, this was still treated with a measure of suspicion:

The one thing with academics, I don't think that academics are genuine, sincere people. If you approach one and discuss issues affecting you and needing support, they would come across as though they hear you, and [that] they are in support. But when you look at the outcome, it's something different... It's not easy to say the HoD or consultants are supportive. They are required to be supportive [but] they pay a lip service [Dr Skwatsha].

While the chasm between black registrars and their HoDs (who are almost exclusively white) is self-evident, the majority of registrars felt that there were still opportunities for corrective action such as getting a critical mass of black persons in positions of authority as HoDs (and divisional heads, or consultants). Hiring a sizable number of blacks into positions of authority was often emphasised:

Part of the problem is that there is no single black person in a senior position. In fact, in our department all our consultants are white. You have people from the old school who find it difficult to take us in as blacks [Dr Ratshitanga].

While the registrars feel that their race may be an inhibiting factor as far as their receiving support from a head of department is concerned, there are other conditions around training that make it easier for *laissez faire* HoDs to selectively withhold support. For example, in cases where the training does not follow a scripted sequential programme, and much depends on the goodwill of the HoD and consultants to provide training opportunities to the registrar in the sub-speciality areas, registrar neglect was commonplace. However, HoDs can be responsive to such complaints as they arise, as in the case of one registrar who approached his HoD and insisted on a documented regimented programme that he (the registrar) would have to follow so that he is fully equipped for his next round of College of Medicine examinations. The HoD agreed, and things started improving with the registrar receiving clinical exposure in all sub-specialities through hospital rotations.

At the conclusion of this research, the examining college had recognised this loophole and thus introduced, forthwith, a logbook and a portfolio requirement which documents expected training opportunities and mandatory timelines. The logbook is used to demonstrate that the registrar has actually clocked up all the required training procedures, while the portfolio is also used as a formative assessment tool for the registrar. It is presumed from the college's point of view that this should make it much more difficult for the HoD and/or the divisional head to be indifferent to registrar clinical training needs. Whether this will be an adequate assistive mechanism to ensure that there is equitable access to quality clinical for all registrars is not clear.

Although the opinion of the majority was that HoDs in general were not supportive of black registrars, not all concurred. There was, however, one dissenting view by one registrar that appraised the HoD positively for lending them support:

He is approachable. His door is always open for people to come in and speak to him about work or anything that is personal and is affecting your work. He tries with the work situation as best as he can. He is quite supportive [Dr Mxenge].

Regarding the support from HoDs and other senior personnel at the UCT FHS, some of the responses were more nuanced. For example, two registrars maintained that although the most complex medical cases were at the main hospital which is a key teaching site and presented plenty experiential opportunities in terms of rotations<sup>87</sup>, registrars here were usually very unpleasant when compared to auxiliary sites. Thus, while most senior medical personnel at the secondary sites were on hand to assist registrars through their rotations and expose them to opportunities in the required sub-specialities, the same favour was rare on the main site, although both sites were populated by older white male senior medical personnel.

### **6.7.2 Institutional Support: Registrars (Black and White)**

Where there existed a sizable presence of blacks in a particular department and unit, they tended to club together, coalescing around the presumed shared 'racial' and cultural markers<sup>88</sup> that sets them apart from white registrars. The purpose of this organic coalescence, apart from marking black solidarity (in an environment that is predominantly white) was human agency. This is discernible in the conversations black registrars had among themselves with respect to their role in laying a foundation for a future black presence at the institution in specialist medical training. One registrar reported that although they 'do argue among ourselves as blacks that we must stay on and finish and not leave so that we remain here for others coming after us for training – helping them' – it is difficult to make the commitment to stay on.

There are, however, difficulties in the black registrars' support of each other, particularly in those departments where support would depend on the number of black registrars in them. Thus, a sense of common purpose organically evolved among registrars in those departments

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<sup>87</sup> Registrar rotation involves the agreed clinical schedule that must be adhered to by the trainee specialist and those charged with putting into effect the training schedule, usually senior medical consultants.

<sup>88</sup> See, for example, the brief discussion on homophily in Mouw (2006).



in which they had a presence, whereas in those departments where their numbers were negligible, there seemed to be less coalescence, and thus, no real black solidarity.

Contact with and support from white registrars was rare, and where it happened, it was more likely to be out of necessity for blacks than from the commonsensical civil imperative of human contact. This reflected also the mistrust that exists between black and white registrars. That is, the perception that whites might be getting privileged information given the social networks they access and which blacks necessarily cannot, as one registrar put it:

Towards the exam, we try to stick to the white guys hoping that we will get information from them to go through the exams. That is the reality of the game. We have to be very nice to our colleagues at that time because they might pass all their privileged information [Dr Ratshitanga].

### ***6.7.3 Institutional Support: Consultants (White)***

Black registrars in this group recognise the rare expertise that their clinical principals (consultants) possess and thus see UCT FHS as an ideal environment in which to learn and excel in specialist clinical practice. However, such potential was seen to be constrained by the apparent indifference of the predominantly white consultants who are charged with imparting clinical competency to them. In that context, the white consultants' overzealousness to meet white registrars was seen to be in direct contrast to the much more muted disposition expressed in their encounters with black registrars. Overall, therefore, consultants were not seen to be supportive of black registrars either in terms of helping them in their professional growth or in providing expected opportunities for clinical experiential learning. For example, this is described in the earlier section of the chapter by the strong suspicion of one of the registrars that pivotal information about the College of Medicine examinations might be volunteered by the white consultants to white registrars since they are all presumed to be part of the wider white network at UCT FHS, from which black registrars are excluded.

Another illustration of the apparent lack of support is what some of the black registrars see as belligerent (if not outright hostile) conduct by white consultants towards them. One of the registrars related an incident at which she made a mistake in the theatre while working under the supervision of the white consultant. Instead of guiding her as to the correct clinical procedure warranted under the circumstances, she berated and chased her out of the ward. Interestingly, while this incident was reported by the registrar concerned to a higher authority

(the HoD), the case simply fizzled out through inertia. Thus while the HoD apparently spoke to the consultant concerned and even asked her to expunge the derogatory notes she made about the registrar on the patient's file, the consultant never obliged, and the HoD simply lost interest in the case. In rationalising the turn of events, the registrar was reminded by one of her black peers that it was a mistake in the first place to have thought of the HoD as a neutral observer to whom complaints may be lodged since he, too, is part of the broader white social network to which he has responsibility.

Complicating the relationship between the black registrars is the exercise of autonomy by the white consultants in declaring their discomfort in working with particular registrars who are also black. There were also nuances in that there was an acknowledgement that there were other white consultants, albeit in a minority, who were seen to be helpful, as Dr Bam suggests below:

I suppose there are teachers who are there to help. But there are others who would say: I'm not going to work with so and so. Somehow, we do cope, never mind how horrible the conditions are [Dr Bam].

The tale of the registrar's experience insofar as seeking and getting support from consultants does not necessarily follow a linear racial patterning of white consultants providing less support to a black registrar than to a white registrar. Instead, on a rare occasion, the patterns may be more nuanced than they seem on the surface. However, this was far from being the norm since racialised experiences are much more pronounced. The nuances, however, tended to be explicated in mutterings like, 'she/he does this to everyone', in this way universalising, and thus, normalising the experience. Age differentiation is also used as another mechanism of rationalisation of white consultant non-support. This draws a distinction between those white consultants who are of a 'minor' age against those who are older, with the latter (given their experience and self-assurance) being more open to the black registrar unlike the former, who sees the black registrar as their fierce competitor:

So it is okay. It is usually something I would laugh off and move on. Most of the consultants are older. They have experience and stuff. The one consultant I was talking about was a young consultant. I think she probably just wants to make a name for herself through these underhand tactics. Maybe if I finish [and become a consultant] I would have a bit of a complex [too]. Probably she may have been trying to cover up for her weaknesses because she is not that experienced [Dr Baratang].

## 6.8 The Phenomenon of Racialised Expertise

Because white patients (and their families), students, registrars, and consultants sought to judge black registrars first as blacks, it was generally acknowledged that race had consequences for them at UCT FHS. The ‘racing’ process of black registrars spanned the hierarchy, with those below them in the chain of authority also participating in the vetting process. These included white MB ChB students and patients. This illustrates the staying power of whiteness at UCT FHS. The unwanted vetting by white students is very clearly described below by one of the registrars below discussing how he takes them through tutorials during ward rounds with them:

I find that when I help white students, you can see it in their faces that they are not settled. They doubt if they are getting the correct information, or if I’m misleading them – [they wonder] if I know what I’m talking about. You can even see that others are thinking: Who does he think he is? [Dr Ratshitanga].

There is an undoubted air of resentment in having to perform such functions particularly in that there are no material rewards and at worst, according to the registrar, they seem degrading and exploitative. However, for fear of recrimination, registrars almost always grudgingly oblige, as Dr Ratshitanga adds:

But I feel that at my level, I should not be doing demonstrations for [undergraduate] medical students because I do not get paid to teach students. I should not be subjecting myself to this kind of scrutiny. But these guys [consultants and senior academic staff] use us to do teaching for them and we cannot complain [Dr Ratshitanga].

It is, however, widely recognised that registrars teach at UCT FHS since, like the rest of the University personnel, they get a discount on their student fees. Therefore, while his contention with regards to being gratuitously vetted by white students who are his juniors on the hierarchy may have some credence, this need not, however, detract from one of the very essential imperatives of being registrar – which is, that all registrars need to be involved in some kind of teaching and tutoring.

Some sought to rationalise both not knowing and knowing as elements or signifiers of any apprentice programme (registrarship included), while simultaneously being conscious of their blackness and its attendant consequences. Others, however, rationalised the racialising of

expertise as a social process that is universal and, therefore, something within the realm of the normal and everyday social activity wherein the burden of proof is on the black registrar to demonstrate their worth to white patients, registrars, and consultants in whom, it is presumed, clinical expertise resides:

In my experience, I would speak generally now, and not just about UCT FHS. A black person is a different person wherever you go. If you are a black man in the US, in the UK, or in South Africa, you are a black man first before you become anything else. You are a black doctor, a black this, and black that. You will always have to prove that you can do something. So I would generalise that it is like that [Dr Skwatsha].

Dr Skwatsha had worked in the United Kingdom as a medical officer soon after completing his two-year community service, which was preceded by one year of internship. In seeking to rationalise and understand his displacement at UCT FHS, and perhaps come to terms with it, he makes reference to the United Kingdom and the supposed racialising of black expertise in that environment. The point he appears to make here is that racialising happens owing to the spectre of race and racism. Thus, it is not a phenomenon unique to South Africa, but is commonplace in all race-centred societies.

The everydayness of the social process of racialising is, according to another registrar, congruent with South Africa's history of racial ordering. The tenor of the comments, below, lays bare the sense of shame and humiliation associated with being subjected to a racial hierarchy. In recounting incidents when other colleagues (white physicians) solicited expert opinion from their peers, the application of the racial hierarchy seemed at its worst in terms of recognising those who are competent and those whose competent was always marred by an element of doubt, disbelief, and scepticism, as this registrar explains:

My perception is that you are first black and the rest follows. That's the judgement that goes with it. If I'm sitting with one white doctor, one Indian and one coloured here at work, whoever comes will always start with the white guy first. If they see that he is not paying attention, then the focus will turn to the Indian, and then the coloured. I will be the last. You see it when we are working in groups... . They start with everyone else before they come to me. It is very embarrassing. It is off putting. You just switch off and you basically lose interest when they come to you at some point [Dr Mxenge].

Although the import of his account connotes infliction of humiliation and shame, as a tactic to fend off the onslaught, he opted for impassivity, as he points out:

I never get angry at it really. I just lose interest ...they treat you that way but you sort of overcome it. If you were to react to each and every incident, you will be fighting everyday [Dr Mxenge].

Unlike the assertion recorded above, the response below alludes to a relentless scrutiny and standard differentials for registrars who received their initial medical training at one of the historically black medical schools. Since the expectation from the mainly white establishment is that black registrars have an inherent deficiency (more so if they went through a historically black medical school) even when they give correct answers (not anything out of the ordinary), they get overly praised by the white consultants not because they are in the know, but rather for having defied the rule (with expectations having been set too low):

If you are like average, they would ask where you come from and if you say Tambo Medical School, they would say: Oh! This is actually good. But you know yourself that that was nothing out of the ordinary. There is such meanness here! There is this belief that you are inferior and you must feel inferior... .Like with exams, if you knew something, you might be adjudged as 'good', but the question is: Are you "good" for good or good for black? So it's like, are you 70% of the world standard or of the black standard? That I don't like.... Maybe it's because my skin is so sensitive [Dr Bam].

## **6.9 The University and the Geopolitics of its Host City (and Province)**

Among the many ways that they attempted to rationalise the negative attitudes harboured by members of the host society was the unprompted reference by the registrars to the socio-historiography of the Western Cape province in general, and that of Cape Town, in particular. The city has a long history of social structuring that was historically anchored by race (in its most essentialised conceptions) through the city's sojourn into colonialism and then, apartheid. This, according to the black registrars, seemed to still have a firm hold on the texture of social relations among people of different 'races' in the province and city. While blacks are a majority in all the other provinces of South Africa,<sup>89</sup> they remain a conspicuous minority in the province which, has a higher proportion of 'Coloureds' and whites per population than it is the case elsewhere in the country. Singularly, the history of colonial and apartheid job reservation that pitted 'Coloureds' and blacks against each other created

suspicion and mistrust, while resentment still lingers. Coloureds were granted concessions by their white handlers at the expense of the blacks, and therefore held positions of relative advantage and privilege. To add to the charge, blacks generally believe that most Coloureds subscribed to and were comfortable with their second class status as long as blacks knew their place (third class) and did not make forays into the Coloured second-class honorary position.<sup>90</sup> This, (it needs to be restated) is believed to be the genesis of racial fissures in the Western Cape province and in Cape Town, and this dynamic, it seemed, had found self expression in the academy too. In this regard, black registrars see UCT FHS as an extension of its external environment, wherein the outsiders have a great sense of discomfort since their presence threatens to alter, rather than edify, existing patterns of racialised social relations:

The way Cape Town and the Western Cape are structured, in the health sector, the people who run the show are the white doctors, the Europeans, and the nurses are Coloured. The patient is the black man. Then I come in here and I don't represent that kind of thing. I come in as the manager, on top of a Coloured! [Dr Ratshitanga].

He then added:

You see, if you are black in this area, they would always ask you: Where are you from, meaning, this is not your place. Then I would say I am from North West. But with time, I developed an attitude. Now when people ask me where I come from, I just say South Africa, and I know they can't ask any further. I get irritated by whites because you find that most of them are not even South African, [yet] they would ask you something like that. For some reason, they feel they belong here more than you do [Dr Ratshitanga].

In conversation, many of the black registrars construct the UCT FHS, the hospital and the city (and province) as one coherent political monolith. Far from the usual notion of looking at academies as neutral, disinterested, and apolitical spaces, the registrars' social reality of UCT FHS is that, despite its traditional role as a centre of excellence, the academy is also a political institution – a perfect barometer through which to gauge white psyche, power, and privilege. The following comments aptly illustrate the suggested correlation:

I remember when we were voting in the local government elections. The whites were worried that the city was going to be taken over by the ANC, and they were saying that in this department that the [electoral commission] must not allow illiterate people in the city to vote. I said to myself, but illiterate

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<sup>90</sup> See Erasmus (2001) and Western (1996).

people in this city are blacks. So they are actually saying that blacks must not vote. If somebody can say that publicly in a tea room with so many people and be comfortable, she probably knows that everybody shares the same views as hers; otherwise, she wouldn't take the risk of being the only fool. So these should be conversations that they normally have among themselves [Dr Baratang].

There is a typology of blackness inferred in the relationship between blackness and in Cape Town/the Western Cape on the one hand, and between blackness and out of Cape Town/the Western Cape on the other. For the prying white gaze, there are socio-cultural indicators and, perhaps, linguistic markers that place blackness into two distinct subject positions, i.e., blackness as in outsider-from-the-outside (black migrant to Cape Town/ the Western Cape) and blackness as in outsider-from-the-inside (black and a native of Cape Town/the Western Cape). While both subject positions are on the periphery, on the face of white scrutiny, the latter, given their predisposition to Cape Town/Western Cape, are therefore presumed to be more amenable to the prevailing climate – and are thought to have internalised it as natural, commonsensical (normal) - and therefore an integral part of the day-to-day life. That is, they are presumed to know and be at ease as to what it means to be black while living and working in the Western Cape and Cape Town.

#### **6.10 Black Registrar Victimization (or Victimhood?)**

Although none of the registrars of Narrative One related any incidents of victimisation at UCT FHS personally, there was in general a feeling that the institution is not a safe space for unorthodox and critical views. Registrars feared the possibility of recriminations by those in positions of authority. The researcher here sought to make a distinction between acts of victimisation/fear of victimisation on the one hand and victimhood on the other. Those claiming victim status often are seen to be laying a claim to unearned privileges while turning a blind eye to corresponding obligations to those privileges such as, for example, hard work. On the other hand, victimisation implies social injustice inflicted upon those less powerful. While there were no direct incidents of victimisation that registrars reported, the sense was strongly expressed that one needed to be watchful to avert the likelihood of victimisation:

The HoD has an open-door policy, but when we go there, we are always careful that we don't complain too much because we feel we might be punished. They might want to make your life even more miserable [Dr Ratshitanga].

Contrary to what insiders at UCT FHS might believe, black registrars are loath to lodge complaints because of both perceived likely consequences (as could be inferred above) and the accompanying stigma of being ‘the one to cause trouble’. Thus registrars, instead of weighing the merits of their complaint, would get entangled in self critique and self doubt. This discomfort was made explicit in comments muttered such as ‘maybe I don’t have a thick skin’, or ‘maybe I’m too sensitive’.

Where registrars related incidents of victimisation, they were not self-reporting, but rather giving accounts from third parties, which they interpreted as victimisation. According to Dr Ratshitanga, above, black solidarity and pragmatism are seen as standing in contradistinction to the ideals, desires, and outlook of the establishment. Punishment is meted out subtly, at times making it difficult even for those being punished to make the connection. For instance, in the quote below, Dr Skwatsha insists it is not difficult for student activists to substantiate claims that it is they who are not succeeding in certain courses because they are being deliberately marked down owing to their ‘radical’ political beliefs that challenge the dominant white commonsense:

I have seen it [victimisation] a number of times. I have seen it in my undergraduate years where people were just not threatened, but were actually victimised. I have seen, for instance, students who were progressive, students who were involved in any of the politics that were pro-black; you’d find students who were doing well suddenly starting to struggle. How did that happen? So, it is not just a matter of people being threatened with victimisation, it happens [Dr Skwatsha].

Dr Skwatsha is an alumnus of UCT FHS where he completed his undergraduate medical training at least nine years ago. While he has been in the registrar programme for a while, interestingly enough, chooses to use his undergraduate experience (and not his registrar experience) at UCT FHS to give an account of incidences he considers as tantamount to victimisation during the undergraduate years. The undergraduate years constitute important formative years of his adult life at an institution of higher learning. They matter since it is here that he started developing his perceptive lenses about UCT FHS with which to understand and interpret his current experiences at the institution.

There was, however, one outright dissenting view on the omnipresence of victimisation – and this was consistent with the respondent’s earlier views that, although the environment is not



welcoming, he had earlier declared that his HoD has always afforded him the necessary support. In his case, the HoD was a necessarily and sufficient antidote for victimisation, as he postulated unflinchingly that:

For victimisation to happen, the HoD will have to also collude and that means he himself would have to be racist. I don't see that in our department [Dr Mxenge].

### **6.11 Academic Career Prospects**

Registrars were asked about whether they would give academia a thought as one of their career choices upon completion of their training. Predictably (given their extreme disenchantment with UCT FHS), all the five registrars in the narrative had decided against an academic career. While all the registrars who ruled out the possibility of taking up academic positions at UCT FHS did not make specific mention of their disenchantment as the reason, it would be imprudent, nonetheless, to suggest that their unhappy experience had not played its part in the decision against an academic career, especially at UCT FHS. The cumulative experience of being out of place, feeling unwanted, and receiving a lacklustre support from the institution, would naturally count against an academic career in that same place. After all, the dominant theme here seemed to be 'cut and run' – get a specialist qualification and disappear as quickly as possible thereafter. The following comment by Dr Skwatsha captured much of the tenor of the attitude by registrars towards academia:

Not for me [an academic career] and it's not because UCT FHS has put me off or anything. It's just because I have never been interested in the academic stuff, teaching and research. Even the academic lifestyle doesn't appeal to me – you know – writing papers and stuff. No. I'd rather do things than talk about them [Dr Skwatsha].

While his approach was not an outright refutation, and he may give academia a thought at some point in his life, Dr Mxenge did not see academia featuring in his short- and medium-term plans owing to the burden of expectations on him by his immediate and extended families:

It won't happen immediately after I qualify. I would probably go and work for a number of years. You know that your parents are falling short here and there and you must just come in and make a difference. You just can't stay here [at the university] forever. Early on, you know that there are these things that you must do. I must sort out my cousins, do this, do that. You have all these responsibilities.

You only have that time to make a difference. If you don't, those lives could be ruined forever [Dr Mxenge].

Gendering the rationale to bypass an academic career, Dr Baratang sees academia as incompatible with her mothering role which she sees as a priority. While her comment below may be misconstrued to denote a kind of symbolic violence<sup>91</sup> on her own gender, her approach seems to be one of choice and what she (as an educated woman) thinks should be her role in society. This departs slightly from the orthodox view which typifies a woman's role in subservient terms. Suffice it to say that for black women, subservient roles are more amplified because of their race. Commenting on a possibility for a future role in academia, Dr Baratang candidly opines:

It would be a very nice thing to do, but I don't think I would have the energy to do that. I think we should leave it to men. I have to have another child before I die. An academic environment takes more of your energy. It consumes a lot of your time. I don't think I need that stress in my life [Dr Baratang].

It was important to gauge the level of interest in academia as it shed light on the difficulties experienced in recruiting black specialists for academic posts, hence the researcher's attempt to tease out an interest in the academic route with the registrars. Given the range of reasons given, the paucity of numbers would remain a challenge for the foreseeable future.

## **6.12 Employment of Personal Resources: A Survival Toolkit**

Although the registrars deeply resent the UCT FHS for its apparent hostility towards them, they had all remained in the registrar programme, and none in the narrative thought of quitting as an option. The question about available personal resources that kept them afloat was important in the context of contemplating possible remedies for future cohorts of black registrars who may have to face similar experience of displacement and of 'not feeling at home'. The researcher sought to explore what resources the registrars received, both internally and externally from the institution that kept them in the programme, despite their trials and tribulations. Internal resources which registrars cited were mainly the attribute of resolve, propelled by the innate desire to serve their own people.

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<sup>91</sup> See Bourdieu (1995).

Apart from the conviction that they are not only a nominal black body but rather a representative of a group and a service provider to their own people (given the shared histories between the black registrar and the black patient), black registrars construct their role in terms of its agency towards challenging the entitlement syndrome of whiteness. It speaks to the politics of healthcare as inseparable from the broader struggles in society of social injustice and inequality.

Registrars were clearly more conscious of their 'guest' status at the institution. To ensure that they survive in the environment, registrars tend to adopt a more utilitarian approach and thus become pragmatic in garnering support. In this instance, they recognise that some of the invaluable resources might lie outside their sphere of control and influence as one respondent recalled, as regarding his preparation for the College of Medicine examinations (as seen before):

Towards the exam, we try and stick with the white guys because we are hoping we will get information from them to go through the exams. That is the reality of the game. We have to be very nice to our colleagues at that time because they might pass all the privileged information to us [Dr Ratshitanga].

Careerism in the registrars' approach is also exemplified through innate personal resolve and in keeping the black body aimed at the ultimate prize, that is, to qualify as a specialist within an area of one's choosing. As one registrar argued, 'if you give up, if you don't go there again, he [your tormentor] will be very happy, so I just say, let me go back and show up on his face'. One registrar forcefully added (here also demonstrating resolve), 'I am here to get what I want', meaning the specialist qualification. However, that resolve was propelled by a strong sense of self-efficacy and self-affirmation by black registrars who are in an environment where affirmation is rarely ever evident. As one registrar self-assuredly quipped, 'I am a doctor and a good one for that matter'. Intermittent gravitation by black registrars towards white registrars in the period leading to college examinations, while clearly opportunistic, reflects black registrars' perceptions about whiteness. That is, while whiteness may well avail itself to privilege white registrars, it may, however, not be that likely to privilege black registrars (or take them into its confidence). While assessment processes are almost a sacrosanct ritual of academies and no effort is ever spared at protecting their integrity there exists some perception by registrars that there may be indirect shepherding of white registrars by those in positions of authority both at the institution and at the College of

Medicine. This again, illustrates the deep gulf between the two groups (black and white registrars at UCT FHS) who inhabit different social spaces within the academy, one privileged wherein social and other kinds of capital abound, and the other devoid of any of these.

### **6.13 ‘I Couldn’t Possibly be the Doctor’: the ‘Invisible’ Black Registrar**

There was, in general, a feeling among black female registrars, as illustrated in the quote below, that although they are present and contribute to patient care, their presence in the hospital milieus was often ignored. Even where there was readiness for acknowledgement, those that they encountered often presumed a role ‘less’ of a physician in the medical hierarchy, and although this was an experience, in general, with regards to black registrars, it was even more acute with black female registrars:

There was this white male doctor who didn’t know who I was and wanted to give me a run-around. He thought I must have been one of the nursing sisters. You know, I couldn’t possibly be the doctor. The nursing sisters knew who I was ... I put on my mask and got ready, and this man approaches and commends, “Oh! Is that really you [the doctor]?” [Dr Baratang].

The nexus of the story here is that blackness was a primary marker that almost always preceded the formal role of doctor and the relative authority attached to it. Therefore, for the individual black registrar to attract deference (respect), the embellishment ‘doctor’ is overly important, not just owing to the authority and reverence vested in it, but more so because it is a marker of their personhood without which their presence may not be acknowledged at all since blackness lacks utility and currency relative to whiteness. Alternatively, where there were indications of recognition that one was present; the most likely presupposition by mostly white insiders is that such a black person they were encountering was in a ‘subservient’ role, relative to that of whites. Put differently, the embellishment of ‘doctor’ seemed to be the sole marker of the black registrars’ personhood without which they (black registrars) may be presumed to be absent while present. That is, in the white social ‘field’, the role of physician is not just defined and internalised in terms of its technical, utilitarian and authority-laden components. Rather, it is conceived as that which is present in the white body itself, and as an innate part of its being.

Therefore, in the white social imagination, the two roles (being white and a doctor) necessarily find expression in each other. To the extent that they do, the white self seldom feels the compulsion to have to defer to the role of 'doctor' (let alone to have to remind others of that inscription 'doctor' on its body). This is unlike black registrars who have to employ the embellishment 'doctor' as their currency to purchase the same recognition, privileges, and deference that almost naturally get granted to whites. It is this purchase – this recognition – necessary for their presence to be acknowledged that requires a black registrar to defer to the authority of 'doctor' to reclaim the same social space white effortlessly maintain and deem theirs. As one of the registrars, Dr Ratshitanga, narrates, 'you see, if somebody hadn't seen me in the ward before, and I was walking in, they would say: 'Sorry, it is not visiting hours' – thus confusing him for a relative coming to visit a patient, and not for a doctor in charge.

In this instance, it is worth noting that out of the total of five respondents in the first narrative, it was only three that had explicitly signalled their invisibility as doctors – that is, the apparent lack of recognition (or identification with the role of 'doctor'). Two are women (the only women in the narrative) and the third, a man. Although the two women had similar views regarding their non-recognition by others, there are several ways within which this experience can be explained. For example, it is a given that there have been very few black women qualifying as physicians while, nonetheless, a reasonable number would have qualified in other areas of occupation considered 'soft' such as nursing, occupational therapy, physiotherapy, dietetics, speech therapy, social work, and so on. Thus, the fact that both women were confused with a social worker and a nursing sister may, at one level, only speak to the hard facts of the paucity of women in the 'harder' disciplines, hence the overzealousness to presume all women at UCT FHS as anything other than doctor. While there is also non-recognition for one of the male doctors, Dr Ratshitanga, he is never confused with a social worker or a nursing 'sister', but instead for a relative who may have failed to observe hospital visiting hours as required. Therefore, on face value, although these deductive processes seem almost benign and commonsensical, when further interrogated, they speak to the racial stereotyping of the subjects involved. In the case of the two women physicians, there is an added burden that has a gender dynamic. Thus, although blackness has consequences for them, it is simultaneously anchored by their gender: an added burden from which most black men are sheltered – given their relative privilege position compared with the black women.

#### **6.14 Registrars' Undergraduate Experience with UCT FHS: An Aid or a Curse?**

As outlined earlier, out of the five registrars in the narrative, three had been undergraduate students at UCT FHS. That is, they received their initial medical training at this institution before serving their mandatory internships and community service, and then working as medical officers in the public sector hospitals. While there were particularities about the registrars' undergraduate experience at UCT FHS, in general however, the registrars' appraisal of their undergraduate experience was viewed negatively. In other words, the three registrars did not see their experience at UCT FHS during their undergraduate years as a pleasant one although they may have been content in respect of the quality of teaching and clinical training. In recounting her experience at UCT FHS, one registrar reflected on the student residence climate as being part of the broader UCT ethos – a white English middle-class milieu which she described as 'a cultural thing' that runs across the entire white space, be it at the level of the Faculty or even in student residences. She went on to compare the climate at the University of the Witwatersrand in Johannesburg at which she did her first year of a commerce degree before being accepted for a degree in medicine at UCT FHS. 'When I was in Joburg', <sup>92</sup> she said, 'people were very friendly...when I arrived here (UCT FHS), things were very different. It was just a different kind of game to play'. What is intriguing about the comparison between the University of the Witwatersrand and UCT FHS (both being white English middle-class institutions with a deep colonial heritage) are the implicit underlying assumptions about both. Dr Baratang recognised the terrain as white, and thus with its own set of rules. For one to stay afloat in such an environment, does not need passivity, but rather mastery of the rules of the game. Here, to play does not necessarily mean one uncritically lends the game being played credibility. Rather, it is to say that to navigate existing unequal social relations, one needs to understand their machinations so that they too profit from the game.

While it may be ordinarily presumed that prior experience of a place usually tends to put one in a position of some comfort compared with newcomers, it did seem, however, that in the case of this group of registrars, the more unpleasant that undergraduate experience was at UCT FHS, the more unpleasant their registrar training experience became. 'For me, I don't think there is a difference between experience for blacks at UCT FHS whether undergraduate or postgraduate ... I would say that black people don't get a good deal at UCT FHS',

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<sup>92</sup> Local abbreviation for City of Johannesburg.

declared one of the registrars. When laying bare existing social and economic inequities founded primarily on race, Dr Skwatsha sketched the following scenario from his undergraduate days at UCT FHS:

I remember when I was still undergraduate medical student in the clinical year, they would provide inadequate transport from hospital to hospital and from hospital to UCT. You'd find that maybe you have a lecture at 16:00 [at the medical school] yet you are supposed to be at some hospital, say Somerset Hospital at the Waterfront, till 15:45. Most white students at university level have cars. Black kids have to wait for this transport provided by the university for them to be ferried from hospital to the medical school and make in time for the lectures. You'd probably be late for lectures. Otherwise, you may have to rely on the white kids for transport [to avoid being late] [Dr Skwatsha].

There was, however, one of the three registrars who did not consider his undergraduate student years at UCT pejoratively. Like the other two, he felt disenchanting, but unlike the others, he saw his undergraduate tenure at UCT FHS as a privileging experience. He 'suffered' in his training on account of enrolling in the mainstream programme with a group of white students as opposed to going through an extended curriculum, which was almost mandatory for the majority of black candidates (given the supposed inadequacy of their schooling). It does appear that his having avoided the attendant negative connotations of an extended programme aided him while a young undergraduate student at UCT FHS in constructing a stronger sense of self. To require academic support, it seems, presupposed some kind of inadequacy or deficit (in public discourse within UCT FHS) and perhaps fed into the racial paradigm that such inadequacy (and deficit) is an inherent and innate attribute of being black.

### **6.15 Summative Conclusion: Narrative One**

It became apparent in this narrative that the school and family as social institutions were not reliable predictors for these black registrars' eventual experience. For instance, the registrars in this narrative come from diverse familial and schooling background, yet they experienced the UCT FHS in more or less the same way in that they all found it not only alienating but also antagonistic.

To say that the school and the family were not reliable predictors of experience need not, however, detract from the influence they both had as social institutions. Their favourable appraisals were unsurprising, with the family as a source of inspiration and guide, receiving a

more positive assessment than did the school. As argued earlier, and as evidenced from the data, predisposition to white milieus did not seem to play any role in terms of circumscribing the black experience in narrative one. That those three registrars were already predisposed to UCT FHS during their undergraduate medical training did little to texture their experience in terms of ameliorating the wrath of whiteness.

Overall, Narrative One depicted a gross sense of discontentment with UCT FHS, with some of the accounts bordering on a description of apartheid era human relations. This was vindicated by stymied (at times, even non-existent) social interaction, alienation from the dominant institutional culture (seen as white Anglo-Saxon and middle-class with a strong male bias), and a lukewarm institutional support (with heads of department being seen in a particularly negative light). Different rationalisations were made by registrars in making sense of this gross feeling of displacement. Most conspicuous was the juxtaposition of their experience to the geopolitics of the host province and the city which have a noticeably smaller population of blacks and a majority Coloured population (whose interests are presumed to converge with those of the dominant and economically powerful white group – here, not so much in terms of the data presented but in socio-historical terms). In addition, given that all the five registrars had had no benefit of active middlemen smoothing their entry into the institution, this presupposed the absence of existing social networks, hence the evident alienation.



## CHAPTER SIX: PART TWO (Narrative Two)

### Surviving navigators: ‘This is not theirs [only], I also deserve to be here’.

#### 6.1 Introduction to Part Two (Narrative Two)

Registrars adhering to the second narrative hypothesised here are surviving navigators compared to respondents in the first narrative who saw UCT FHS as a white space almost beyond redemption. The surviving navigators exhibited a stronger sense of resolve – a kind of conviction that they too had a rightful claim to what had remained mainly a white social space. Nowhere is this positive sense of self and conviction is as clearly illustrated as in the comment below by one female registrar:

I have always had this thing in me when people tell me that there is only a place for one person – I always tell myself that that person is me. That is what I was told in the department. They said that eighty (80) people apply every year, and there is a placement for only one (1) or two (2) people a year. I just told the secretary that, okay, then I’m one of those two (2) and I walked out. Anyway, I later called, and they said I’m in [Dr Ramokgopa].

This category, by far, represented the majority of registrars in the study. Blacks in this group, as the narrative shall demonstrate, were not passive receivers of white social and cultural ‘nourishment’ (or even the wrath of whiteness). While they do recognise the hegemony of whiteness at UCT and its motif of exclusion, they are not overawed by its pervasiveness. As it will be shown, respondents here have sought various ways to engage, rather than disengage, with whiteness (involving identification of opportunities to challenge and/or alter its hegemony).

**Figure 8: Narrative Two Registrars**

Name	Schooling	Gender	MB ChB
Dr Leballo	Former Model C	Female	HB MS
Dr Lenkoane	Former Model C	Male	HB MS
Dr Motaung	Former Model C	Male	HW MS
Dr Tanga	Former DET	Female	HW MS
Dr Kgosi	Former Model C	Female	HB MS
Dr Ledwaba	Former Model C	Male	HB MS
Dr Satyo	Former DET	Male	HW MS
Dr Ramokgopa	Former Model C	Female	HW MS
Dr Magagula	Former Model C	Male	HW MS
Dr Soni	Former DET	Female	HW MS
Dr Sobahle	Former Model C	Male	HW MS

## 6.2 The Intersection between Family (and Community) and School

Of these eleven respondents, Dr Leballo's background best illustrates how the family's social networks can be better harnessed (adding to the existing bountiful capital readily available in the family). These social networks can provide conditions for role modeling, being predisposed at an early age to a variety of elite occupational fields and their unwritten social etiquette:

My mother was a nurse and there was a family friend who was a GP [General Practitioner]. As a child, I just loved him and would spend a lot of time at his place. I played a lot of times with his daughter. So I would be in their house often. [There] I would go into his study... I just liked the environment. So, that's where I got the interest [into medicine]. My parents always knew that when I was not around [in the house], I was at his place [Dr Leballo].

Dr Leballo's experience is unique, particularly in terms of the kind of social networks that were available. She is the only respondent in the narrative that has had a close and personal encounter with a medical doctor because the medical doctor was part of the family's social networks. In other words, it is primarily the family's middle-class positioning that put her at close proximity to other role players in the middle-class stratum, hence the registrar's effortless access to the GP, who, apart from affording her a studious ambience (an important cultural assortment), also by extension, was a role model for her - the ideal that she was to strive to emulate with her family's tacit approval.

Some of the registrars in this narrative boasted a strong academic tradition (as in the case of Dr Leballo, above) in their families and have had early exposure to elite professional occupational fields such as medicine and law. Both Dr Lenkoane and Dr Sobahle boasted a strong family tradition of members, plying their trade in an array of professional elite occupational fields, and this seemed to have precipitated their yearning for success and interest in medicine, as is illustrated below:

My father was very successful considering where he was. He studied in Denmark and the United Kingdom. He was an administrator, a civil servant. He used to read a lot. He was more into the humanities – sociology, psychology and so on... But that influenced me into medicine, I really cannot think of anybody else. I always knew from my mother and father that I was going to succeed – that I was going to do something better about my life, but what, it was never really known [Dr Lenkoane].

I have got uncles who are engineers. My dad is a lawyer and runs his own private practice. There are lots of teachers and nurses. My sister is in social work. So, there is a broad representation across many areas of work... there were enough people to look up to [Dr Sobahle].

However, even among respondents from 'pure working-class backgrounds', there was evidence that family had also provided success stimuli from within, even though the family may not be of a middle class background. For example, Dr Satyo, below, recounted:

I come from a pure working-class background. So, in my family I was one of those who were given an opportunity. I took it and ran with it. So my father always wanted me to succeed .... I do not know how it started [interest in medicine]. It may have been around Standard 9 [Grade 11] or Standard 10 [Grade 12] and I started thinking about where I want to be [Dr Satyo].

Therefore, despite a disparity in economic capital (and social capital – given the social ties and connections both are likely to command or not) different sets of families seem to have marshalled their capital such that they have the same effect on their subjects. Enculturation of registrars into elite roles in society is an obligation often indirectly vested in a singular familial figure who would play a lead role in their steering. This central familial figure evidenced in the data, usually is a member of the immediate family, as the following elucidations illustrate, 'my mom is a lecturer in the field of science education, she is probably the one who instilled the love of science' to 'my dad is an economist, he works for the Department of Economic Affairs and he is the one who encouraged me'. Emphasising the role of familial figures as facilitating (guiding) rather than controlling, Dr Lenkoane asserted:

I always knew from my mother and my father that I was going to succeed ... they just said they would facilitate and support me in whatever choices I was going to make [Dr Lenkoane].

While it may appear that in looking at the contribution of the family as an institution, the dominant primary relationships are (1) the family itself, and (2) the self (individual registrar), there was a third element that completed this tripartite relationship, this being the community and the role that it, too, played in moulding and guiding the registrars. Here, while the family inspires the self to reach the highest potential, there were corresponding expectations harboured by the community, that the registrar, as the first doctor coming from it would be a change agent that would add real positive meaning to the life of that community:

Because you know what happens in communities – you know I was the first doctor to be produced from [there]. Everybody knew that so and so is doing medicine and the pressure was on. You can't come back and tell them a story. You know when you are doing second year, people are already coming to you saying I have a headache and you know! That was the situation. You had this load on your shoulders that people are relying on you, and that pushes you [Dr Ramokgopa].

Medicine, as a recognised elite discipline, is seen as a vehicle by which to transcend the family's current social standing. In this instance, the role of the family would be to better the stakes by catapulting one of their own into medicine because they are deemed to have earned their right to 'be something better than their own family's pace setters', as Dr Ramokgopa explains below:

Nobody had studied medicine but almost the entire family was in teaching – some became school principals and so on. The inspiration came from my elder sister who was a teacher because I did well at school, my elder sister had this thing in her that we don't want you to be a teacher, you must be something better. She would say, I became a teacher because at that time it was easy to do teaching - they had free bursaries so it was free to do teaching. So she said you have so much talent – you are getting awards – topping your grade, and nationally with matric, I got distinctions and she said you have to do something better. You know you have to study things that would enhance your capability, especially mathematics and science related. That is what pushed me into medicine [Dr Ramokgopa].

It is worth noting in this instance that majority of respondents have had the benefit of a relatively privileged schooling, for example, out of eleven respondents classified in this category, eight boast a former Model C schooling background. While the three respondents who had less privileged schooling had enrolled at historically White medical schools (HWMS), such trend was not necessarily replicable with those registrars that had privileged schooling backgrounds. While four registrars from privileged schooling background attended their initial medical training (for the MB ChB degree) at HWMS, another four of them sought enrolment at historically black medical schools (HBMS).

Overall, most respondents appraised the influence of their schooling in positive terms. A minority of respondents in the category tended to appraise their schooling either in neutral or negative terms, declaring, for example, when asked about the efficacy of their schooling that 'not at all, I don't think so'. In portraying her schooling in neutral terms, Dr Kgosi remarks thus, 'yes and no, and maybe predominantly no because the majority of people that I went to school with did not go that far in life, you know'. However, as the data would show in the

later parts of the section, there seems to be an enduring relationship, overall, between privileged schooling and positive schooling appraisal. In other words, those that had gone through the most exclusive of schooling environs seem to ascribe better descriptors of their schooling experience, as Dr Leballo eulogises below:

We had a lot in our school programme compared to other schools. We had tennis. We had swimming, badminton, music. In winter, we had a beautiful uniform and at the end of the year, we had Christmas carols. We would have fun... Every time I took my bag and went to school, everybody would say “Uh! You people from that school think you are better! Everybody was wearing black and white [as uniform] while ours was very different... It was a different school and we were not allowed to speak any other language in the school premises except English [Dr Leballo].

The above comments not only reveals South Africa’s gross social inequities premised on race, but also make evident the extent of consciousness about Dr Leballo’s privileged status. For instance, while appraisal of under-privileged schooling is devoid of any glowing descriptors, that of privileged schooling extends beyond the utility of schooling by highlighting what Anthony Giddens refers to as the ‘hidden curriculum’, as evidenced in the school’s extra-curricular offerings. Here, the school is recognised as a site of cultural appropriation (and re-appropriation) and nowhere is this more aptly demonstrated than in the hegemonic and privileged status of the English language.

When appraising his schooling in terms of its contribution to creating a success path for him, Dr Sobahle, like Dr Leballo, explained the effects of schooling from two strands, namely, the school as a social space on the one hand, and on the other, as a tooling (and retooling) institution that prepares its learners for the next phase of their development. In this instance, schools are seen as agencies that give them the minimum grades so as to get access into post school institutions. Gravitating more towards the social utility of schooling, Dr Sobahle recalls:

At school, I was very sporty. I wanted to play sport. At primary school, there were not many professional sports people around but when I started going to high school, I started knowing that there is a professional tennis club etc., so I had this idea that maybe I can be a professional sports player. I played tennis at the time and I really wanted to play it full time [Dr Sobahle].

In many typical resource-starved black schools administered by the old DET, elite sporting codes such as tennis would have been considered a bourgeois pastime, given that most schools could barely afford extra-curricular activity on account of the paucity of resources. His background, therefore, seems to have escaped this entrapment. Like Dr Leballo, he is from a relatively privileged background but unlike her, he reflected little on his privileged position. While Dr Leballo very clearly acknowledged her privileged schooling status, Dr Sobahle's social reality revolved around his immediate familiar surroundings.

Nonetheless, it would be incorrect to suggest that all of the schooling experience under the former DET can be described in pejorative terms only. In certain instances, registrars pointed to differences in academic outcomes. That is, even within the same kind of depravation, some provided an enduring schooling experience as Dr Tanga from a DET school background argued, 'the general belief is that they [township schools] are all not that good enough, but the truth is that there would be a range of quality'. In addition, it would be incorrect again to infer that the former Model C schools, as illustrated by Dr Leballo's appraisal above, are the only sites of cultural appropriation (and re-appropriation). In fact, underprivileged schooling environs, too, force onto their subjects certain habits or practices over and above the resultant utility value of the schooling experience. Such a process of cultural appropriation (e.g. learning to be disciplined and so on) is not seen as an independent social engagement to formal school activity but rather one that is directly linked to the life of the school itself. Dr Tanga recalls of her experience this way:

My secondary school, it was one of those which were thought to be very strict. The principal still used corporal punishment. You know you couldn't wear earrings. So it was one of those schools where you couldn't do everything you wanted to. It was not an average township school. It was one of the best, comparatively speaking, and it was known to be excelling... . It was fine [Dr Tanga].

Dr Tanga's appraisal of her schooling as a social process of cultural appropriation also is corroborated by Dr Satyo, who boasted the same DET schooling background as Dr Tanga:

It was quite good. It truly was quite good. A Roman Catholic school – it surely was quite orderly. It was dictatorial in a way. You [had] to follow certain [rules], and here, there were no ifs and buts.

Everybody was to be in a uniform and you were not allowed to bring plastic bags <sup>93</sup>to school. You were not allowed to have long hair. You were not allowed to plate it. We would be at church every Wednesday morning.[It was a school that was] firm and with strong values [Dr Satyo].

A privileged schooling background need not be confined to South Africa's territory as specific socio-political circumstances forced some black families to seek possibilities of home elsewhere. In most cases, the neighbouring states which had already attained independence such as Lesotho, Swaziland, and Botswana provided such possibilities of home for exiled South African families. The social fabric of these new milieus affirmed the black presence instead of ascribing negative apartheid connotations to it. In describing their schooling, the respondents tended to display a greater sense of racial consciousness. However, this could be attributed to the acquired perceptive lenses arising out of South Africa's racialised past, which in turn had a great effect in the shaping of their life experience – giving it a perspective. For one of the registrars, Dr Magagula, the Swaziland experience catapulted him into his current self and subsequent successes:

It was very fulfilling – there you learned very early on that your abilities are not determined by your race...the greatest thing about that environment is that you can go anywhere in the world and you'd walk tall and confident about your abilities [Dr Magagula].

Unlike his counterparts in South Africa on whose heads the race question always lingered and affected their life chances, Dr Magagula's racial consciousness emerging from the interviews seems less burdensome. It is a kind of consciousness that is about self affirmation. The greater sense of place need not presuppose a total absence of whiteness. Rather, whiteness in that new socio-political context did not seem to represent a white hegemony, but rather, something that which was different, and even igniting curiosity. Dr Ramokgopa, who in much the same way as Dr Magagula went through the Swaziland education system, explained her contention with whiteness as follows:

We used to share showers with whites. You know for me that was a first. You know, it was like, uh! A naked white person looks like that! Oh! Okay! They bathe as well and they fart too. You know; things like that. You know I am coming from an environment where we were scared of whites ...so [the] Swaziland experience shaped me and made me feel confident. It made me feel that it is my right to be

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<sup>93</sup> It is a well known practice in underprivileged communities to see school children using plastic carriers as school bags, and this is often frowned at by school authorities because they are considered an environmental hazard.

here. It is not like they were doing me a favour. [This] was a renowned international school – you had children of the elites going there. Lot of politicians sent their kids there [Dr Ramokgopa].

Therefore, as is shown in this section, respondents seemed to give more weight to the family as an institution in respect of the directly positive role it played in steering them into the life choices and career paths they ultimately chose. This strong weighting on the family did not seem to border on the registrars' familial socio-economic circumstances. For instance, even one of the registrars (Dr Satyo) who is self described as coming from 'pure working class backgrounds', confirmed the positive effect his family had. Interestingly, (as was the case with the registrars in the first narrative) there was a tendency to look at the family as being an integral part of the community. Thus, not only did registrars appraise their own nuclear and extended families positively, they also cast their immediate communities in favourable terms. Although schooling is positively appraised for its utility (affording one the opportunity to get the necessary grades needed for admission into a tertiary institution), the family was seen as an ever reliable source of self-affirmation – offering the much needed grounding for these registrars. This was an important observation to make for the purpose of this research, since the Narrative Two registrars (unlike Narrative One registrars) have cast themselves as change agents.

### **6.3 Existing Internal Networks at Point of Entry**

This group of registrars included both those invited by the establishmentarians and those who had 'invited' themselves (for want of a better term). The subsection seeks to consider whether these varied points of entry had any effect on the actual experiences of this group of registrars at UCT FHS. For example, does the fact that a registrar benefited from insider influence puts her/him in a better place to feel at home at the institution than those that had received no assistance and encouragement from within? Further, how would this compare with the experience of 'the drowning' registrars in the first narrative?

Of the eleven respondents in the narrative, seven had not had a benefit of an insider or a middleman who facilitated entry into UCT FHS. This apparent lack of social capital (the absence of readily employable social networks to facilitate admission) appears to be somewhat contrary to the pattern that emerges from the first narrative in which none had had the benefit of insider social networks in negotiating entry into UCT FHS. It would, therefore, be important to establish the social texture of the orthodox routes that led them into UCT



FHS. For example, how was contact established (either with the establishmentarians themselves, or else with those close to them), what were the terms of this contact, and what did the registrars make of it? In other words, how is this initial contact appraised in the context of their overall sense of being at home, or not being at home? Put differently, do they fare any better if they were invited into UCT FHS as opposed to those who came uninvited? Sometimes the social networks that apply are indirect and need not be confined within UCT FHS and its immediate surrounds, as Dr Sobahle here explains his peculiar routing into UCT FHS through an 'indirect' social network:

My boss at Port Elizabeth hospital went to school with one of the specialists here [at UCT FHS]. So, that was my only link [to UCT FHS]. But I hadn't spoken to him [my boss's contact at UCT FHS]. I only asked Dr Satyo [one of the senior registrars who hail from the same town as him] that if there were positions coming up, please let me know [Dr Sobahle].

The role of the Dr Satyo (one of the black senior registrars who alerted Dr Sobahle to training opportunities at UCT FHS) is important in that, while an outsider (for by no means is he a decision maker in the bigger context of UCT FHS politics), he guided Dr Sobahle into accessing training opportunities. In contrast, his [Dr Sobahle's] contact, that is, Dr Satyo's boss at UCT FHS, is presumed to have unlocked possibilities of entry for him into the institution, because of his personal friendship as a result of the 'link' between the senior insider at UCT FHS who happened to be a friend of Dr Sobahle's boss, also a medical specialist and consultant. At the time of conducting this research, Dr Sobahle and Dr Satyo were the only black registrars in their chosen area of speciality, thus further cementing their marginal status at UCT FHS cemented.

The position of insider–outsider also assists. This is especially the case in situations where, as a medical officer, one is seen in relatively favourable terms by the influential senior white medical personnel. To be seen in favourable terms by establishmentarians need not presuppose that one automatically becomes an insider, that is, part of the establishment. That said, insiders are key to clearing one's path into the registrar position: a point aptly illustrated by the comments below from one of the female registrars.

[While working as a Medical Officer (MO) in the specialist unit] you meet all these consultants, those who are already senior. So, people know about you. Maybe they spoke to him [the Head of Department] about me... You see, you have to have referees and your case carries more weight if it is

people from within the system. I knew I got on well with a number of consultants and I put them down as my referees. So maybe that helped [Dr Ramokgopa].

Dr Ramokgopa explains that the trick about successfully gaining entry into this environment that doubts black potential and ability is to know exactly the rules of the game and then play accordingly. In the event that one was able to cultivate good working relationships with those on the inside, as was the case with Dr Ramokgopa, these relationships were then used to mitigate against one's marginal status and the inherent aberrational positionality on account of one's blackness. This, augmented by a strong drive to succeed, assists in the entry negotiation phase.

On the other hand, Dr Satyo's case presents something of an ideal – where there was already an interest in him and he had always been encouraged to return to his alma mater to do specialist training. Although he was not much attached to a close-knit social circle to which his entry successes could be attributed, the feel-good factor about him in the department seemed considerable, and had apparently contributed to his positive sense of place at UCT FHS as it will be demonstrated below:

I was fortunate in that within the department they have always shown interest in me. They have always wanted to get me back into the department. So, during my short stint in the mines as a Medical Officer, before I left for the UK, I came for a few days in CT. I met this fellow who took me around and introduced me to some people there within the system [Dr Satyo].

Dr Satyo also credited his hastened entry into the system to an agreeable political climate of that moment of time in which a certain discourse of change found its place into the academy, with the institution having to be seen to be changing. He saw his entry as a follow-through of the aftermath of South Africa's 1994 historic bloodless revolution – a transition from a pariah apartheid state into a multiparty constitutional democracy:

My entry into the department was easy. It was early then. It was at that time after the post 1994 magic revolution in South Africa and universities wanted to be seen to want change. So they went out of their way recruiting people. So I came just after that period of great frenzy [Dr Satyo].

Besides the role of insiders in facilitating entry into UCT FHS, there are other conditions that usually come to bear in increasing one's chances of access. As has been indicated already,

the registrars that had had access to internal social networks at UCT FHS, like Dr Ramokgopa, had worked at a specialist unit at a hospital associated with UCT FHS at which they were identified by the consultants and the Head of Department. The role of insiders is critical in gaining entry but so too is some familiarity with the place – having immersed oneself into the environment through some role, mainly as a member of the medical personnel in the main teaching hospital. In that way, one's reception by the establishment tends to be warmer than usual:

I didn't know her personally, but there was somebody here who had been on the registrar program. She gave me contact details of some doctor at Westville Hospital<sup>94</sup>[a satellite hospital]. Everybody told me that it would work out. I went to see the doctor [the Somerset Hospital contact]. She was very interested in me and she told me that there was going to be a refresher course or something. She also organised one of the senior registrars to come and talk to me. She just went on and on, and she said: you must just come and specialise in our department. She was very positive. So she got me over. She was a very nice chap [the doctor was one of the senior white consultants in the department – there are no black consultants in the department] [Dr Kgosi].

As indicated, while a limited number of registrars had the benefit of a middleman to facilitate entry (and this is not to detract from individual human agency required), the majority of registrars had to gain entry out of their own volition with no insider-assistance. This applied to even those registrars that had been through UCT FHS for their initial medical training. Contrary to what one might expect, they still struggled on their path to the academy as much as those from medical schools other than UCT FHS. However, there was concession made that, irrespective of the hurdles at entry, 'it was not a strange environment [UCT FHS]. It was a familiar environment'. Dr Magagula added, 'It helps because you are aware of the dynamics and the politics involved'.

While the usual suspects in terms of gate keeping will be consultants, heads of departments, heads of divisions, and senior professors in their respective fields of practice, gate-keeping often is the responsibility of those whose formal roles may, at face value, be devoid of any authority (and reverence). In other words, in the context of UCT FHS, the politics of entry i.e., gate-keeping, often happens at levels lower than those conventionally expected. One of

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<sup>94</sup> All names of hospitals have been anonymised to protect the identities of the respondents concerned as is the case with 'Westville Hospital'.

the experiences of a registrar during his initial contact with the departmental secretary is worth quoting:

I actually phoned the department and spoke to the secretary. She said there was an opening [a vacant registrar post] but the closing date was in a day or two. I must say the secretary was very hard on me. I sent my application anyway [Dr Magagula].

While it is clearly evident from the previous sections that those who had the benefit of willing middlemen valued such intervention as it made their entry less painful, those who were not the beneficiaries of such privilege did not seem to think that they were disproportionately disadvantaged since, even without such assistance, they still accessed the medical school relatively painlessly. In the case of two registrars, after much thought they changed from programmes into which they were initially enrolled into other more palatable medical specialties. In each case, the decision to change specialties (departments) did not seem to depend on the prevailing climate in the respective departments.

While there is a standard mechanism of gaining entry into registrar positions, in respect of all the respondents who had gained entry without internal solicitation, they resorted to using various routes for entry parallel to the conventional route. In that regard, while some had enquired, applied, and were interviewed, others simply came in as medical officers (or house officers/senior house officers) and were then channelled into a registrar position, depending on how agreeable they had become in the eyes of the white medical establishment. Some, upon applying, were granted telephonic interviews after which they were then offered posts. As one of the registrars who had come into UCT FHS (with no prior experience other than that as an intern and subsequently as a community service doctor) explains, 'at the time, advertising [of posts] was not a big thing, especially training posts You just applied and you were then told if you had a post or not'.

Unlike the registrars in the first narrative, some of the registrars in the second narrative received some active support from the social networks that facilitated their entry. However, most still came through the natural route of applying for a vacant registrar position and hoping for the best. Insider-outsider positionality seemed to facilitate entry best. This is when one is in a medical officer position, and in the normal course of doing one's work, one is seen and appraised favourably by white members of the establishment. It was shown earlier,

however, in the case of Dr Magagula, that being favourably appraised comes with one's knowing and observing the rules of the game, i.e. knowing which masks to wear and in whose presence. It would also require palpable social skills on the part of the candidate to be ultimately considered for a position as registrar. It was also clear that when it came to registrar admission into the formal academic programme, there was no one uniform route through which to negotiate entry. The rules and requirements varied, depending on context and the idiosyncrasies of the specific disciplines.

#### **6.4 Social Interaction**

This group of black registrars seemed to straddle successfully between the resentment of the white hegemony on the one hand, and a conviction that they too have a legitimate claim to being at home at UCT FHS on the other. Consequently, for this group, this tended to open some opportunity to be socially engaged with the white 'other' as well as providing the white 'other' with an opportunity to experience the black 'other'. In this subsection, the researcher illuminates the black registrars' ideas as to how they related, interacted and perceived the white subjects, in particular, the positionality of whiteness in relation to blackness.

Most registrars characterised social interaction between themselves and their white counterparts as 'forced' or happening through 'default because we are there and we have to interact'. The sentiment offered by Dr Sobahle, below, captures succinctly the general characterisation of the black-white social contact. In the absence of ideal conditions that make such 'default' or 'forced' social contact possible and necessary, such contact accordingly ceases. The respondent, however, contrasts his experience at UCT FHS with that of another predominantly white environment:

We have to do everything together. Wherever you go, you are always paired with someone. We attend classes together. So there is interaction at work, but as I said, it happens by default. In terms of social life outside the school; no! Here it is very different to where I come from. At PE hospital you knew that you were a team in orthopaedics and that you did everything together. After hours, we still came together. There was better sense, a feeling that you were all colleagues [Dr Sobahle].

He then proceeded to hint at what he thought might be inhibiting social factors towards a more desirable black-white social interaction. These included an element of doubt (at times,

suspicion) that exists between black and white registrars. The apparent lack of a black presence is seen as a mechanism through which white domination sustains itself.

We try to say we are all professionals and on social issues we can engage with each other, but on social issues, we come from completely different perspectives. You know, people are very scared to come out clean and tell you where they stand. You never really get honest answers. You'd hear things here and there, and with a lapse of concentration, people would throw a line or two that exposes them and you'd sort of say, oh, that's how you see me? So they try to be politically correct but do slip up on occasion. But much of the problem in our department stem from the issue of racial representation. In this day and age, there is no way that you can still have one group with so much dominance and yet they are a minority in the population count [Dr Sobahle].

Although the respondent below confidently opined that black–white social interaction was ‘difficult’, and thus perhaps reflective of the tenuous black–white social relations at UCT FHS, he sought to position himself as being above the fray (in that he socially does relate to whiteness). He conceded that some black registrars do find his easygoing social interaction with whites somewhat suspect.

Well, I think socially, we do relate but racial interaction is still very much difficult given the politics of the country. But for me personally, I do not have a discomfort in any setting just because I am black. Integration is not an issue for me. I also think that I speak my mind on any issue. I am very much aware of who I am...informally, we will interact. We do have to interact with consultants because they are an authority... I do have a white consultant that I interact with but it is because I knew her from undergraduate and she trained me, in a way. People who don't know me from my undergraduate do get suspicious [Dr Magagula].

As he added:

Because my accent is different, people tend to relate to me differently. I do not have a distinct Zulu accent. So white people tend to think, oh, this is somebody we can relate to – he is not from here simply because I speak just about the same way as they do. So they would at me as a so-called better black. Sometimes I get that perception. So whites would think, this one is not like all the others [Dr Magagula].

A watered-down version of blackness is not the only social conditions through which black-white social interaction was made possible. Age and cohort differentials also played a part in mediating social interaction. Dr Ramokgopa saw a dependable social circle arising out of her

registrar training cohort. This, she observes, was a trend with all the other cohorts that came after her. People tended to create bonds with those whom they started out the registrar training with. Here, she implied that the feeling of belonging to a race in that instance did not necessarily override that of belonging to a cohort. She explains the genesis of gendered and ‘aged’ social circles:

We started as a group of four (4). I was the only female. The rest were people in their forties (40s), all men. There was one white, one Indian and one black guy. And later, another one white guy joined, but we always remained a bond with the people we started with [Dr Ramokgopa].

The quote above signifies a stark contrast with registrars in the first narrative wherein the intersection of race and age was most prominent. For instance, young white consultants were more likely to mistreat black registrars. In this case, because it was older white men who were themselves registrars, age seems to be less significant.

However, this seemingly immutable social bond to which Dr Ramokgopa refers in the preceding quotation did not extend beyond the bounds of work. Below, she rationalises the apparent limitations of this social bond not in terms of race, but rather in terms of its gendered essence outside the physical confines of UCT FHS:

I had a relationship with them when it came to just work. As a group, they preferred to get together after hours. It wasn’t easy as a female. I already had a child. There were family obligations and your husband will always be your husband, you know. When you get home, you are not a doctor. You are expected to do the cooking, the washing. I always had a helper, but there are things that they don’t do, or you just want to do those yourself [Dr Ramokgopa].

Distinct from Dr Soni and Dr Ramokgopa’s experience, Dr Tanga (below) spoke of the importance of black-black social spaces. While clearly not meaning to detract from the merits of black–white social interaction, its absence is not lamented, as blacks valued the safe space that they have created for themselves out of which they draw sustenance. Black–white social interaction has a utility value, but so has black–black, because of the latter’s apparent cultural compatibility. In this instance, blackness does not have to find self-expression through whiteness, that is, it need not seek white trusteeship (love, care, guidance). Moreover, the fissures in social relations are naturalised (normalised) and in that way, blacks chose to socialise with blacks because it just makes more sense, it just so happens ‘naturally’, it is

easier. Black-white social relations need more investment, and blacks seem a lot less eager to commit to that kind of investment:

We tend to make friends with each other within our racialised groups. If you were to socialise, it would probably be a fellow black person. It's not because we have issues, it is just easier that way...I think I relate better to a black person. If I now say to another black person, you know this and that, they would relate to that which I'm saying more quickly than a white person. You know, culturally, you understand each other. I don't think it's a conscious decision to say, I would relate to so and so. You just feel more comfortable with a fellow black person. They just have a better understanding of the issues than a white person. A white person will come to work and talk about her cat that is so sick and so on, and I will be like, but that's the least of my concern. That kind of relating, well, to another white person it might be interesting... [Dr Tanga].

Her contemporary, Dr Kgosi, also seemed to characterise the black–white social interaction as absent, as she declared, 'there is no socialising. The whites have their social gathering and we have our own... So we are different. So integration! No'.

Following a similar line of thought is Dr Lenkoane who is also unmoved by the apparent fissures in black–white social interaction. Below, he candidly suggests that although some may feel excluded in the course of interacting, it is only because of a natural inclination to exclude. People are more comfortable with the familiar – with those that they know best and with whom they have existing bonds, and to the extent that this may seem not premeditated, it might be advisable that not too much is read in respect of the apparent absence of social interaction:

The way people interact is different. You'd find that people would refer patients to doctors they know, people that they have bonds with and this may exclude you – the same with me. If I want to refer a patient to surgery, it is easier for me to pick a person that I know. Those making the referrals to you also know you and ultimately, they trust that you'd make the correct judgement. So in a way, that's how I understand it. Personal relationships matter [Dr Lenkoane].

In illuminating the black–white social interaction, there was also an attempt to explain social interaction as a preoccupation that unduly detracts from the value of the hard science that underpins the physician's day-to-day work. In other words, the registrars' identity within the work environment is aggregated exclusively in terms of their professional role, which need not be extended to the social spaces they occupy outside the UCT FHS confines. While



interaction happens, 'I think it is mainly professional, you leave your personal social life out of it'. Social interaction, of course, need not only concern 'social life'. Rather, the professional environment requires social interaction in the carrying out of the same professional scientific roles:

After each and every call, the next day you meet a consultant and you go through all the cases. Where you agree, that fine, then that's fine, but where they [consultants] don't agree, then they make a suggestion...with your presentation [they usually prepare and do case presentation in class] the consultant can help you a lot... For the last two years, there have been more black candidates coming into the department. Before that, they were very few. I could say 95% of recruits were white people. For the last two years, it has been getting better [Dr Ledwaba].

What we can infer in respect of social interaction is that while it is clearly valued as a social activity within the institution, registrars in this group appeared unfazed by its apparent absence, making the status quo almost a matter of commonsense. That is, it is to be expected that in social spaces where blacks and whites meet, given that both had always lived in worlds far apart, it was disingenuous to expect a radical shift in social relations. In this way, the black-white social fissures are normalised and, as has been demonstrated, those that seemed to socially interact with their white colleagues with ease attracted much suspicion from their black brethren, as if to say they were 'selling out their race'. Overall, registrars seem to say that black-white social interaction, if evident, can only be purely by 'default' or 'forced'.

It is clear that this group of registrars appraised black-white social interaction negatively. At the best of times when interaction was evident, conditions under which interaction took place seemed suspect. It either was 'forced', 'difficult' or 'by default'. Interestingly, there was a feeling among some of the black registrars that when they were able to establish rapport with some of their white colleagues, other black registrars became suspicious, suggesting that they might be selling out their race. Rapport with whites, while always difficult, seemed possible in the case of same class bonds created in previous years at the medical school (especially where the black person seemed to be the only black face in that class). This was so, particularly with blacks that enrolled in the mainstream MB ChB programme during their undergraduate medical training at UCT FHS. Since these blacks are presumed in the white imagination to have remade themselves in the image of whites, they tended to be afforded an ear of their white colleagues. They were, however, still clear and unambiguous about their

outsider positionality. That is, not even a favourable white appraisal made them instant insiders.

### **6.5 Dominant Culture, Traditions, and Symbols**

Respondents reported attitudes of disdain by white senior colleagues towards traditional African belief systems while implicitly sanctioning traditions and symbols deemed part of the white mainstream – the celebrated centre. For example, the respondent below cited a critical incident in his own department which demonstrated that the dominant master beliefs continued to have a staying power over others outside the ‘norm’ (such as the reverence for ancestral powers, and the accompanying rituals attached to that belief system). Implicit in his concluding statement on the cultural fissures at UCT FHS is that whiteness is incapable of identifying with the black experience, hence it can only be other senior black medical personnel who would be understanding and sympathetic to the demands and particularities of the black cultural space. He recounts his own experience with the white cultural centre thus:

There are colleagues of ours who are Jewish and every September there is a holiday that they celebrate, and it is known that they won’t be at work. So these guys, for the whole weekend they will be off duty. So I’ll have to run the show from Friday, Saturday till Sunday. So it’s like it can happen for some. So if I have to have a ceremony to slaughter at home, say, because my sister has passed her degree, and ask for leave, they would say, but that’s not a [religious] holiday [it is not for religious grounds]. So there are cultural differences. But then, if there is a black head of department, he might understand what I’m talking about. With whites, the attitude is, ‘what’s so special about slaughtering a poor animal while there is so much work to be done here at the hospital’ [Dr Sobahle].

The respondent below pointed to the grave inefficacy of the white cultural frame. That is, whites are content to want to understand blacks through applying a standard penned by the white cultural centre against which blackness must be measured or understood. Indicative of the staying power of whiteness, the white cultural centre had remained very much intact even in the face of an increased presence of blacks (save to mention that overall, whites still far outnumber blacks at UCT FHS). Here, however, the concluding remarks by the respondent presuppose flashes of countercultures, even in the face of the omnipresent and dominant white cultural form. The fact that some black registrars could insist on leave of absence even without consent by the white authority in pursuit of African ritual observance most aptly demonstrates the point:

It is still very much English. Like in our department, it is one department that has the most number of blacks but there has not been much change. Only if UCT and the hospital can embrace different cultures! You know, in their culture [the white culture] if there is a funeral, they go on as though nothing had happened. They would go to a funeral at 13h00 and come back to work thereafter. With black people we know that can't happen. [If one is family] there is a lot that needs to be done before and after the funeral. It's not that you want to be a hooligan and stay away from work. It would be strange and disrespectful for people to see you arriving home on Friday for a Saturday funeral. It can't continue like that. There are people who have been denied to attend funerals because it was the grandfather, and therefore in the English sense, he didn't count as immediate family. I saw one registrar saying 'I am going ahead and you can fire me, if you dare!' He just said, 'I'm not going to compromise my family because of this job'. That continues to happen in this department. I can see that if somebody's parent dies, nobody really cares. It would be business as usual. We [the black registrars] have been around here for a long time and they still don't understand us. It doesn't mean for each little thing, we would want to be excused from work. No. The requests are always within reason [Dr Kgosi].

She then proceeded to criticise the UCT FHS culture:

I don't think UCT has changed a bit. The culture with which it identifies – it is still Eurocentric, English and white male dominated. Sadly, it still thinks it is the most liberal institution in the Southern hemisphere. UCT has not embraced Africanism. No space and authority for Africans...the buck stops with the white person – the ethos has remained the same [Dr Kgosi].

While the respondent, below, was in agreement with the rest of his black colleagues on the centrality of the white cultural form on the one hand and the peripherality of the black on the other, he was nonetheless firm that this would not impact on his goal that took him to UCT FHS in the first place. For him, therefore, the utility value of being at UCT FHS outweighed the black-white cultural discord. While the feeling of being 'not at home' is there, it is not sufficiently consequential to determinism. The respondent here is able to ward off the cultural fissures through positive self efficacy – a kind of agency grounded primarily on the particular goals the subject has set for himself:

I don't think UCT is an African university. It is a product of Europe. You see it with reviews [of our professional association journal]. The minute something comes from Europe, it is presumed to be the best – more credible. It even passes through my own colleagues who are black who seem to believe that every piece of research writing from Europe is more credible. You feel that. Do I feel part of the university? Not really. I don't feel that I am at home. I don't feel that this is my university. But, it is not going to get me down. No. I'm not going to quit. It is something that I can endure. I feel that I can achieve what I need to achieve. But, yes, I cannot say that I feel at home here [Dr Lenkoane].

One respondent volunteered her opinion on the actual cultural markers in buildings and spaces at UCT FHS, inferring here that many of these markers tell of an exclusive socio-historicity of whiteness at UCT FHS, while at the same time being oblivious to a past black presence there. On that symbolism, she observed:

Everything reflects the [white] history of this place. You go to the medical library; the walls are full of the pictures of these past deans. Ja [yes] I have to think very hard to find symbols around the medical school that are reflective of the diversity of this country [Dr Tanga].

There was only one among all the registrars in the second narrative that struck a conciliatory tone when appraising the current cultural form of UCT FHS while not totally exonerating it from its white nucleus, as he [Dr Ledwaba] candidly commented:

I think things are changing. There is light at the end of the tunnel. But yes, it is still very much a white male dominated institution. It is not going to change overnight. There are some changes, but, yes, it is still white [Dr Ledwaba].

In brief, this section demonstrated that within the cultural milieu the white mainstream was still predominant. All accepted symbols, rituals and cultural beliefs were expected to be in sync with this white cultural mainstream. There was, therefore, no regard for the cultural pluralism of the South African society of which UCT FHS is part. Were there to be some due regard of the cultural other, this cultural other had to be seen not in their own terms, but rather, through the white English Eurocentric lens. The majority of the registrars in this narrative were disheartened that, even in the post-apartheid UCT FHS, the cultural milieu was still reminiscent of the past, as though blacks were physically still absent, as was the case during apartheid. The cultural milieu was derided for its inclination to find solace, self-expression, identity, and a sense of 'self' from Europe, in particular, from colonial England.

## **6.6 Medico-scientific Culture and its Innocence**

The question here sought to explore the possible correlation between strained black–white social relations and inherent peculiarities of occupations in the 'hard' sciences. That is, if the peculiarities and high demands of clinical medical practice play a role, could this be to the extent that the occupational and cultural idiosyncrasies make nonsense of the theory that race is a predominant mediating tool of black – white social relations? Most registrars were not convinced that the cold white environment owed its notoriety to the cultural peculiarities of

clinical medical practice, particularly given the apparent ‘at home’/‘in place’ differentials that seem to be predicated along racial lines:

There is a certain way of thinking and doing in the medical profession. But unfortunately in this country, those ways of thinking and doing will be clouded by one’s race [Dr Magagula].

For the majority of the respondents, white racism cannot be reducible to a mere collegial disagreement or misunderstanding about work standards and expectations. Rather, it is systematic and subtly interwoven into the very social fabric of UCT FHS, as one interviewee put it, ‘I don’t agree with that culture thing. You can’t not care about your colleagues because of work demands or pressure!’ As to the peculiarities of medical culture that may seem to negate race, Dr Bam – and many others – were not convinced. For him the white antagonism was premeditated and could not be explained sufficiently just in terms of the idiosyncratic nature and culture of clinical medical practice:

I don’t agree. Some people thrive at putting another person down, undermining somebody else’s confidence. I have heard people complain that this happens. It cannot be for the culture [Dr Bam].

While conceding that she has been treated fairly well, and had not experienced any kind of overt antagonism from her white colleagues, Dr Tanga did not support the idea of medicine as having a peculiar culture that lends itself to abuses of certain groups of people by others more dominant. In her rationale, however, she simultaneously ‘naturalises’ any such overt antagonism as part of the ‘norm’ as she comments below that ‘you get different personalities, some more rude than others’. Her contradictory take on the centrality of race, and then, the normative phenomenon of human misunderstanding, merits quotation in full:

Well, if you apply that, then you must apply it uniformly. If you are ruthless and rude, then it must be everybody under you feeling that, not just a certain group. It mustn’t be based on colour. [then she pauses] truly speaking, I haven’t really experienced that. You get different people, different personalities. Some are more rude than others, but it is a sort of balance. Not everybody is rude [Dr Tanga].

It was evident, therefore, that black registrars in this narrative did not see anything too peculiar in terms of the nature of science (or even medicine itself as a science) that could explain the unsavoury black experience at UCT FHS. Black registrars were dismissive of the

suggestion that almost presupposed science (or medicine) as being beyond the particularities of the social world wherein human relations are not seen as being important and what is seen to be important is one's unravelled prowess in scientific practice itself. In such a scenario, therefore, it is right and meet for colleagues to show disdain – as long as patients continue to receive the highest quality healthcare. The black registrars in this narrative poured scorn on this line of thought as they intimated clear racial patterns in their everyday encounters with white colleagues.

## **6.7 Institutional support**

### ***6.7.1 Institutional Support: Heads of Department (HoDs) and/or Divisional Heads***

Registrars saw support from HoDs as vital, and most in this narrative felt that, in general, they were being optimally supported by the HoDs (and, where appropriate, by the designated divisional head). This was in marked contrast to the experience by black registrars in the first narrative, who felt totally neglected by their HoDs. In respect of registrars in the second narrative, however, there was also a sense that support should be accompanied by a greater sense of agency and purpose amongst the individual registrars themselves - the sense that 'I want to finish this'. The following sentiment captures the essence of the registrars' feelings of support by their HoDs at UCT FHS:

I think the support that you get from your head of department always matters. If you get that support from your own head of department, your colleagues and also from your sense that I want to finish this ... our head of department is very supportive. Generally, he is a busy person, so he is not always available. But when you do get hold of him, he is okay. He is approachable [Dr Tanga].

Perhaps the most impartial instance of support that is unequivocal (and unqualified) on departmental support was that related by Dr Ramokgopa. Support in her case was not only about affective aspects of being at UCT FHS (being made to feel welcome) rather, it was more pragmatic, 'when you were writing exams, they would lessen your [clinical] workload especially in areas where they could see you were having a heavy load'. Dr Ramokgopa's seemingly unequivocal HoD's support was corroborated by Dr Ledwaba who seemed to attach much significance to the early years of registrarship during which the HoD's support is vital.

Lack of support and antagonism from other layers of power within the department, if unchecked, can derail the black registrars' clinical training progress. It is in this instance that the support of the HoD is vital since the knowledge that he/she is on one's side can serve as a motivation on which one can stand one's ground in the face of adversity from other quarters. On occasion when Dr Ramokgopa felt that she was being prejudiced by some in her department, especially in respect of her scheduled rotations, she had stood her ground, heavily relying on the knowledge that 'I am very good at what I do and there is recognition from the HoD'. She continued, referring to the HoD, 'he would call me to do special and more complex cases with him. So there is that recognition'. It is this recognition of her talents that aptly demonstrates the extent of the HoD's support. She implicitly interprets the HoD's gestures as a sign of confidence in her – an act of affirmation. This felt sense of security provided by the HoD's unequivocal endorsement, cements the registrar's positive sense of self, and boosts her agency immeasurably – the idea that she is at UCT FHS on a mission and that it is incumbent on her to have this mission accomplished. This is demonstrated in the actual scenario she relates where (thanks to the HoD's support) she fought when she felt there was unwarranted interference with the registrar rotation roster already circulated; and here she explains:

For instance, you'd know that this month it's your section [rotation] for doing this and that, and suddenly you see your name being erased in favour of somebody else who is getting in front of the queue. I would go to that person and say I am expecting to work in such an area, and come the first of the month, I would report there for duty [irrespective of the arbitrary changes]. So, I won't be fighting. I would just state my case. And I think people became weary of me – they would say, you know this one, you can't mess with her [Dr Ramokgopa].

Her counterpart in a different department expressed similar sentiment when appraising the HoD's support. While prepared to concede that 'most of the HoDs are usually not that supportive', she describes her unique relationship in the department with the HoD which did not mirror that of any other black registrar among her ranks. Unlike other black registrars who saw HoDs as unapproachable, repressive and authoritarian, her HoD played a prominent part in her professional development, but most importantly, she has also been a source of social support (a rarity for most black registrars) and here she explains the dynamics of the relationship with the HoD:

I know I have had an excellent relationship with the HoD right from the first time when I was called to come in and work as registrar. Through my personal trials, she has been very supportive to me. That's why I say my answer won't be reflective of everybody's experience. You know, I have support. I can phone her anytime of the day, and ask her, you know, I'm trying to do this, how do I go about it. She would also call me and ask me how are you doing – how far are you with this and that? But, I'm not sure if it's everybody who gets the same treatment. I know people fear her. When she calls people, it would be like, what did I do now? People fear her. I don't think she is a people's person. She can say the wrong thing to you at a wrong time [she laughs] [Dr Ramokgopa].

While rotations can be a catalysts for conflict since they are the only opportunities for real experiential learning, without which the incumbent registrars may be compromised when they sit for college examinations, mistreatment and neglect of black registrars appeared to be considerably reduced where the registrar clinical training program was structured. Under such circumstances, it becomes a known affair as to which rotations (areas of sub-specialty affixed to specific timeframes) the registrars must perform, and since there is no discretion exercised (no fluidity), such an arrangement tends to self regulate and thus attract little conflict. Black registrars who had been in a more fluid programme schedule experienced difficulty in having their rotations honoured without hindrance. In respect of his own department, the respondent below acknowledged the department's support insofar as it adheres to the programme schedule outlined. Nonetheless, he is not attributing this to white empathy or to some grand act of goodwill from the establishment. Rather, it is the structure of the programme that prevented the black registrars from being disadvantaged, as he explains below:

I know there are problems in other departments with regards to rotations, which may be expected. In my department, the programme is so rigid that if they blocked you to go through one rotation, it would just look very odd. There is just no way around how training is tailored [there is no possibility of tinkering with the programme and thereby deny others experimental training opportunities]. You would know that after these three weeks, it's another three weeks of this and that. Unlike in other departments where the programme is so random and therefore easy for people to be neglected, our program is very rigid. I know lots of guys who have complained about rotations...it is mostly black registrars who complain about rotations [Dr Sobahle].

While his counterpart, Dr Lenkoane, can positively attest to a 'very comfortable working environment', that his 'bosses will support me to the best of their ability', and that he has 'never been let down'. As have others, he conceded that his story mirrors experiences of



many a registrar at UCT FHS. He agonised in having to interpret the black registrar experience vis-à-vis the HoDs in racial terms since ‘people see race when it might not be there’. Pondering over this paradox, he then added that ‘sometimes it is difficult to judge if it is my own bias or if, in fact, it is the truth that race is there. I’m not sure’. In making sense of the dilemma, he resorted to normalisation or naturalisation of such likely accounts of racial prejudice. Here, he looked at racial prejudice and racism as incidental social ills in the absence of which other social ills will fill the void, as he forcefully points out: ‘you can work in an exclusively black environment and there would still be a feeling that some are favoured over others’. However, while he was earlier having difficulties in interpreting the black registrars’ apparent lack of support from their HODs purely in racial terms, he seemed to be unequivocally conceding the point when relating third party experiences at UCT FHS:

I personally know of people who complain that in some departments, revision work and tutorials happen behind closed doors with black registrars not knowing. So they feel ostracised in those departments...so there is information that is volunteered to some, but not to others. There are black registrars who have started with the registrar programme a while ago, and were never informed that they needed to be concurrently registered [this is registration with the relevant body under whose auspices they will write their two-part exams]. But white registrars had known this from the start. You see, people struggle to get basic information. A lot of time is it racist? Yes. Sometimes you just feel that some people are being short-changed. It is like you are there, but people can’t identify with you. So they just ignore that you are around. It is a problem. There are people who have left the university because they felt people were being racist – in very subtle ways, of course [Dr Lenkoane].

In summary, it was quite apparent that registrars in this narrative enjoyed greater institutional support, especially from HoDs, than was evidenced in the first narrative. They also appeared to exhibit a range of views about racist treatment – varying widely from experiencing and seeing active racist treatment, to seeing it directed at others but not at themselves, and to not being sure about the machinations of racism. This is an important observation to make since registrars themselves appraise HoDs’ support as a vital contributing factor in making the UCT FHS environment more palatable. This was because they recognised HoDs as authoritative figures of great influence in their departments and beyond. While the registrars generally appraised the institutional environment as foreign’, something that was not theirs, support by the HoDs was seen to be mitigating this feeling of ‘foreignness’, of not belonging. For instance, for those in unstructured programmes, it would be the HoD who sees to it that there are equitable clinical training opportunities in the form of rotations. Where, for

example, there were problems in accessing certain clinical rotations, the registrar would feel comfortable about asking the HoD, as an authoritative figure and a master in the discipline, for assistance.

### **6.7.2 Institutional Support: Registrars (Black and White)<sup>95</sup>**

As in the first narrative, although registrars count support among colleagues as being important, they seemed to consider support from other black registrar colleagues as important while disparaging at the lack of support from their white fellow registrars. Here, the call seemed not to be about impelling whites towards a charitable cause – thereby showing an act of kindness to vulnerable black souls at UCT FHS. Rather, black registrars see unmitigated (and exclusive) white registrar access to the establishment as an added unfair advantage since such access is presumed to have a utility value. In other words, since white registrars can easily access the establishment and its social networks, this privileges them in terms of accessing and processing vital information necessary for their training, as one registrar recalled, ‘some people in the group have information, but they won’t pass in onto you, they would keep it to themselves even when you ask’. However, while it is quite clear that the greatest source of support for black registrars is among themselves, and that white registrars are not favourably counted as a dependable source of support, the relationship is not one of outright enmity nevertheless. Rather, the black-white registrar support is more nuanced, as one registrar who had earlier considered white registrar support as less than ideal remarked in contrast, ‘at the time [during preparations for college exams] you sometimes had the feeling that people [the other white registrars] were working with you’. This is, of course a rarity, especially at any other time in the year as white registrars and white consultants are seen to retreat to their reclusive worlds.

### **6.7.3 Institutional Support: Consultants (White)<sup>96</sup>**

While there clearly was value accorded to HoDs’ support, as has been demonstrated in the preceding subsection, in this second narrative respondents also counted institutional support in terms of the mentoring of the consultants under whose guidance and supervision they work. While it may seem overall that registrars appraised white consultants positively, there often was ambiguity in terms of their perceived supporting-mentoring-expert role vis-à-vis

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<sup>95</sup> Here the researcher looks at support from both white and fellow black registrars, since, unlike the consultants, there are a fair number of blacks at the registrar level.

<sup>96</sup> There are hardly any consultants that are black in any area of speciality at UCT FHS.

black registrars. For example, while Dr Lenkoane painted UCT FHS as being ‘an excellent working environment’, and noted that ‘the feeling that you have support of all your consultants is liberating’, and that ‘[UCT FHS] has exceeded my expectations’, he took issue with ‘subtle things’, which, nonetheless, he was at pains to describe as ‘not significant’. By this he was referring to the tendency of most white consultants to prefer to confer with other white consultants and white registrars than with blacks. However, as has been demonstrated in the previous subsection, he comes to terms with this faux pas by naturalising it – that is, by equating it to other sorts of preferences outside of the black–white dichotomy as he asserted, ‘I mean you can work in a exclusively black environment and there would still be a feeling that some are favoured more over others’. This is the same rationality that Dr Lenkoane had employed when articulating HoDs’ lukewarm support of black registrars.

In brief, therefore, this section on institutional support, as was illustrated by data, showed that unlike with registrars in the first narrative, there was a semblance of institutional support expressed at a number of layers in the institution. Most notably, however, registrars viewed the HoDs’ support, by virtue of his/her authority, as the most vital. HoDs also happened to be senior medical specialists in the field and this assisted registrars in terms clinical training. While it may be difficult to ascribe this semblance of support to any one individual factor, it is only logical that among the factors considered for this difference in terms of support between registrars in Narrative One and Narrative Two are the mechanisms through which they gained entry into UCT FHS, noting here that while registrars in the first narrative have had no benefit of active middlemen and insider support networks that facilitated their entry, some of the registrars in the second narrative did benefit from insider networks. It could be presumed, therefore, that the invitation into UCT FHS itself placed an obligation on those inviting them to play good hosts. One thing, however, remained clear. Such an invitation, coupled with some semblance of institutional support, did not automatically qualify these registrars as insiders. In other words, even with some of the HoDs playing good hosts to them, they still perceived their position at UCT FHS as that of outsiders.

## **6.8 The Phenomenon of Racialised Expertise**

Like respondents in the first narrative, here too, registrars spoke that there was intermittent acknowledgement of knowledge and skill that they displayed from their white colleagues. At the very heart of such an acknowledgement, however, was the element of ‘shock and awe’ that people of their kind could be this adroit. This could be understood within the frame that

whites, as a powerful group in society, would receive black competence with bemusement, as it seemed to operate outside of the normative script which holds that blacks are inherently devoid of skill and technical competence. The element of ‘white surprise’ is most aptly demonstrated by the responses of Drs Sobahle and Magagula respectively:

From day one, you know that there are people watching you constantly. You do an operation, and then somebody comes in after you and comments: oh, this looks surprisingly good! You see, they say these things without thinking. They don’t see anything wrong. It is the old saying that you have to work extremely hard to be considered at the same level as them. They do not have the burden to prove themselves, but you must. It is that thing that their good grade is not good for you. You need to be much better than them to be put at the same level [Dr Sobahle].

In agreement, Dr Magagula corroborates:

I find this often. People will probe. They will ask you questions not because they want help or something but because they want to test you. Often when you give them those answers about a case, and the correct answers, they looked surprised. They like look at you and think [in their minds] just who are you? Are you as good as you sound or was this just a fluke? In other words, what is making you different, because we know most blacks aren’t anything like this? Why is it that you seem to be more competent? Sometimes it can be very frustrating, but then, you have to take it in your stride. You got to take a step back [Dr Magagula].

In countering the racialising of their expertise, black registrars may sometimes present an expected negative front which would be consonant to the mainstream white thought on blackness. Dr Magagula would ‘sometimes play a role of a fool – pretend not to be in the know because that is what is expected’. Choosing the role of a ‘fool’ not only helps to reduce the severity of the debilitating effects of the obtrusive and demeaning white gaze, but, it is preferred since it apparently ameliorates the burden of proof carried by the black registrars, this being the idea that they are deficient unless proven otherwise. White skill (and competence) on the other hand is normalised. That is, there should be no element of surprise since being competent is a ‘normal’ defining feature of being white, as one registrar commented, ‘if it’s a white person, it’s like normal’.

Some registrars, while they envisioned and wished for a ‘race-free’ UCT FHS, they tended to conflate this with that which was the actual experience on the ground. For example, while Dr Satyo fastidiously explained that ‘you are not judged...by the colour of your skin, but what

you bring in – what you contribute’, he then recounted an experience which was less consonant with the desire of a ‘race-free’ UCT FHS as doctors, patients, and nurses alike tended, owing to his race, to be oblivious to his expertise as a doctor:

you meet a patient and you ask them if they had been seen and they respond that they had been seen by that black doctor. So people here always see the need to qualify. But if it’s the white doctor, it’s always Dr Smith, and never that white doctor. We are racially polarised. You get patients who would say, I don’t want to be seen by this doctor, I want to be seen by that doctor, irrespective of your seniority. Then they always get embarrassed when they find out that the one that they think is senior is actually not a senior, but your junior. And then they have to be attended by you [Dr Satyo].

While not totally dismissive of the social consequences of race, some registrars put more emphasis on positive self-concept as black registrars. In that respect, when the ‘racing’ process gets underway, they see this social process as somewhat inconsequential to their day to day lives as registrars at UCT FHS. Instead of conferring into whiteness the psychological advantage to adjudicate over black competency, black registrars deny whites of such space and authority as one forcefully remarked:

I don’t have a problem because I think people will judge you if you give them the space and the authority. The buck stops with you. If you know what you are about and communicate your intentions, assert your presence, you won’t have a problem [Dr Lenkoane].

Asserting one’s presence here need not be equated to indignation, but rather, a pragmatic coping mechanism with the intended goal of keeping one’s right to dignity intact. In exerting such a right, registrars keep their dignity intact while at the same time ‘punishing’ protagonists:

You promptly deal with issues as they come. For example, if I were to hear somebody saying I want to be seen by that doctor, I would say, with pleasure. And they find no luck with their chosen one and they have to come back to you. Then I would say, with pleasure, I will assist. And then you see this absolute guilt in them. They will not make me feel small. This is an art that you learn over the years [Dr Satyo].

His colleague, Dr Lenkoane, corroborated his statement thus:

It is an expectation with patients. It is an expectation with colleagues. Patients would see you and then will demand to be seen by somebody else. I have had experiences where patients preferred to be seen by John rather than me. John happens to be white [Dr Lenkoane].

However, rather than relying on the affective aspects of himself, for example, a positive sense of self to counterbalance white power, Dr Lenkoane seeks comfort also in his technical competencies, that is, '[working] well because at the end of the day, the only measure against you is how well you work...I always try to excel...it makes me a better doctor, it is a good feeling'. Excellence according to the respondent is the best antidote of white prejudice since 'ultimately, people get to know you. They would pick up the phone and ask for your opinion'. While this clearly works for the respondent, it may not adequately circumvent white power and prejudice since the excellence test here seems dependent on white vetting. In other words, the only way one is able to confirm one's technical competency (excellence) seems to be upon positive vetting by the white establishment. While excellence brings with it dividends in the form of positive self efficacy, the vetting authority implicitly granted onto whites on the other hand makes an unmistakable case of the staying power of whiteness, and blackness' propensity to defer to it for affirmation.

It would be incorrect to apportion the racialising of expertise only to the traditional white establishmentarians, since, unlike respondents in the first narrative, a minority of respondents here also found blacks (especially patients) culpable of racialising medical expertise of other blacks. This phenomenon seemed to also intersect with gender: at least as one respondent saw it as she recounted her experience thus:

It happens. It is not just with white people, it is also with black people. I am talking about patients now. You'd find that a white nurse would call you a doctor, but just because you are black and female, a black patient will call you *sis*i [sister] they never call you a doctor. You can't be a doctor! Some of the older white patients would also have a problem, but they have no choice. I am here and I'm on duty. I think it would take some time to accept. I would laugh when they [the white patients] would come to me and brag that, you know, I love black people, my maid is black [Dr Soni].

Another female registrar who did not see race as being a more of a problem in her clinical practice leaned more towards ageism and the gendering of the role of doctor as she took stock of a number of experiences as a black female physician:

You see, if you are female and you are wearing the white coat, a male patient would say, *uyenzani lomtwana ngebaki* [what is this child doing wearing a doctor's white coat]? So they feel that a man has to be the doctor. Other than that, you'd get a male nurse who clearly is a male nurse but the old lady would say to him, doctor, instead of you! It starts at the medical school when you will be assessing patients as a group and then a middle aged man would say, I don't want this girl on my bedside. I am not going to undress while she is here. So you just learn to be patient and laugh it off [Dr Soni].

In brief, registrars recognised the centrality of race in the appraisal and re-appraisal of their expertise as clinicians. Of interest however is the observation that most seemed unfazed, almost blind to this racing process. It did appear, nonetheless, that this apparent blindness to racing was in no way bordering on ignorance but employed as a possible pacifier to this dehumanising experience. In this way, registrars mediated their unsavoury experience in the institution by normalising that which was not normal. Further, they watered down the dehumanising white gaze through playing the role of being a 'fool' – much in line with the blindness mechanism already referred to. All of these cement the assertion that foregrounds the centrality of race at the institution.

In short, this section on racialised expertise demonstrates the predominance of race in medical practice where black medical doctors, as is the case with this group of registrars, are seen to be the exception rather than the norm in medical practice. Their blackness here was seen to be precipitously overshadowing their status as qualified and trained medical professionals. The section also highlighted one interesting point and that was the element of 'white surprise'. That is, while black doctors would be presumed below average (unless they do the extraordinary to satisfy the prying white observer) there would be moments at which they would arouse interest for having far surpassed white expectations. In that case, therefore, the black registrar will then become a trope juxtaposed against other below average 'bad' black doctors who are always seen to fall short as far as knowledge and clinical skills are concerned. It was also indicated, in contrast, that racialising need not be an exclusive preserve of white observers since some registrars recorded a negative experience from black patients. Of course, this has a basis in South Africa's socio-historiography, with apartheid having sown seeds of a black sense of self inflicted doubt and self repudiation.

## **6.9 The University and the Geopolitics of its Host City (and Province)**

Like respondents in the first narrative, in rationalising their sense of displacement at UCT FHS, respondents in this narrative drew parallels to their sense of place with the host city.

Since the host city could not be considered a home for blacks, it followed that UCT FHS as an appendage of its host city should, likewise, be hostile. As a result, UCT FHS is also not seen as an institution of choice for those physicians who might still want to enrol for specialist training as one disgruntled registrar retorted, 'I know of people who want to specialise but they tell me that they will never consider Cape Town - they will tell you that they found Cape Town to be racist'. Then, he self assuredly added, 'you can't say that is hearsay, where there's smoke, there's fire'.

It was not common for registrars to characterise the UCT FHS environment as patently racist, this only emerged as an implication given the range of stories they told of their experience. However, when they came to reflect on their experiences at UCT FHS within the context of its host city, they left little to the imagination. They related a new kind of racism - one that had adapted to the new social conditions of democratic constitutionalism. The following underscored the sentiments of many registrars' feelings about UCT FHS in relation to its host city:

It is of course Cape Town, and it is known to be a racist place, way ahead of Pretoria. In Cape Town you feel the racism all around you, but you just can't put your finger on it, but it is there. But I think I have been able to cope with all of that [Dr Lenkoane].

Of the gravest manifestations of racism that respondents point to about Cape Town, of which UCT FHS is an immutable part, is of a picture of a city in which opportunities for professional growth were a rarity for blacks. Even those who seemed to have made headways, characterised their successes as purely incidental, and thus out of the ordinary. 'With Cape Town being Cape Town, you'll never get an opportunity like this', remarked one registrar. This registrar had just landed herself a lucrative stake in one of the major private healthcare hospital groups in South Africa. At the time of this interview, she had just passed her final College of Medicine examinations.

Apart from the meagre opportunities available to blacks in the city, and by extension, at UCT FHS, respondents reported that within the establishment, there was always a sense of compulsion by their colleagues who are not black to 'other' them. In that regard, while the embellishment 'doctor', for example, was common cause, blackness was an exception in this social ordering as it is inferred to represent an aberration. The following example by one



registrar about the need to inject qualification when speaking of professionals in Cape Town and at UCT FHS better illustrates this point:

That's the unfortunate reality of South Africa, especially with Cape Town. I'm not gonna lie to you. The unfortunate reality about Cape Town is that irrespective of whatever field you are in, if we are talking about Dr Khumalo, it is not just Dr Khumalo, the orthopaedic surgeon, it is Dr Khumalo, the black orthopaedic surgeon [Dr Satyo].

Unlike most registrars who characterised the host city as racist, either explicitly or by inference, one registrar sought nuances in how he saw his relationship with UCT FHS vis-à-vis the host city. Instead of characterising the city as racist, as most did, he chose a rather neutral characterisation:

The way I see it is that Cape Town is very different from the rest of South Africa. When I came here, well, I felt like, okay, life is very different here. For me, if things are more difficult, the more I feel challenged. I don't like doing the same thing at the same place [the reason why he may have chosen to sojourn down south-west]. A lot of people fell off along the way. As you go on, you realise that you have to have a thick skin to stay on [Dr Ledwaba].

In summary, registrars saw UCT FHS as an appendage of its host city – Cape Town and province – the Western Cape province. In other words, they saw UCT FHS as an institution in Cape Town, and not of it. In that regard, they articulated their experiences, taking into account the socio-historicity of its surrounding environment of which race was an active ingredient, hence the centrality of race in the overall registrar narrative.

#### **6.10 Black Registrar Victimisation (or Victimhood?)**

Those registrars that dared to be critical of UCT FHS publicly, or those that had seen others being on the receiving end, reported that there often would be reprisals if one were to seek recourse from officialdom. Notwithstanding whether the criticism was warranted or not, victimisation was seen as a violation of fundamental rights not consonant with the letter and spirit of South Africa's growing culture of human rights and post-apartheid constitutional democracy. Simultaneously, however, victimisation ought to be weighed against the notion of 'black victimhood' which has attracted the most attention in conservative analyses. Here, blacks are reduced to one uniform group which has become content with its victim status because it apparently 'pays to be a victim' – blackness supposedly comes with certain

privileges like, as they will argue, affirmative action, special admission criteria in their favour etc. This is a kind of blackness in the white imagination that is agent-less.

Black registrars who had taken up social activist roles (for themselves and others) reported incidents of victimisation (not to be misconstrued to mean black victimhood, the sense explained above). Here, they saw the colleges of medicine through which they write their specialist examination as an extension of UCT FHS. In other words, if one had had soured social relations with the white insiders at UCT FHS, there was almost always an expectation that one would not go through the critical hurdle of college examinations without hindrance. Two registrars decried the low level of college examinations success among black registrars who were outspoken:

I have seen very outspoken guys, very vocal about some of the things that are very wrong here and predictably, they did not pass their exams, and I knew them to be very strong candidates. They have been here for long and have accumulated more experience. They will come and help me when I'm battling with something but when it comes to exam, they just wouldn't pass [Dr Sobahle].

There are some people who will be sort of against the norm. They get victimised in a way that you sort of hear about it that so and so is not passing because Professor Block said to him that you are not going anywhere. I have heard of it, and I have seen a person writing 10 times. It happens. You also need to work. You have to play your part, and cover your tracks [Dr Ramokgopa].

While Dr Ramokgopa above corroborates Dr Sobahle's claims of victimisation by adding her own account, she foregrounds the centrality of black registrar agency at the core of her argument. In other words, while she agrees that the environment is particularly unforgiving for black registrars, she adds a qualification which seems to exhort blacks to 'play their part'. The further qualification of 'cover your tracks' in fact, seems to make implicit the veracity of the black fear. Here blacks are warned not to be caught unawares, hence they must 'cover their tracks' so that they are not already compromised when the establishment decides to strike.

One of the most interesting observations here is that accounts of victimisation extended to registrars who had reported that they enjoyed excellent relationships with their HoDs and found in them the most support, both professionally and socially. Predictably, however, the accounts of victimisation that they related happen to not involve themselves but others with

whom they maintain a professional and / or social bond. Take, for example, Dr Kgosi's response when asked if she could characterise the UCT FHS environment as pleasurable:

But it is not pleasurable when you are around and you see people being victimised. It makes me feel very uncomfortable. You see things happening. Literally - victimisation. There is somebody who left the department and I saw it in my eyes that he was pushed. I know another person who was victimised. He actually had to threaten the consultant that if he does it again, there's going to be trouble. There is a lot of victimisation and because of this, people retreat into their own worlds. You know we could talk about something when we are together, but when we must act as a unit, people chicken out. People are afraid. It is really sad that we should go on as black people on the one [side] and white people on the other, addressing issues separately. It is sad that people still feel there is a lot of disrespect, a lot of victimisation [Dr Kgosi].

### **6.11 Academic Career Prospects**

As has been explained already in the first narrative, the researcher here sought to elicit the level of interest in an academic career arising out of their total experience at UCT FHS. Radically changing its staff profile so that it represents fairly South Africa's demographics is one of the yardsticks with which desirable social change at UCT FHS in post-apartheid South Africa will be measured. In most of the specialist disciplines, the registrar training programme is a vital stepping stone towards a possible academic career.

Unlike respondents in the first narrative, some respondents here intended seeking and taking up academic positions upon successful completion of the registrar training programme. Interestingly enough, although they were not upbeat about prospects at UCT FHS, almost all those intending taking up academic positions preferred UCT FHS to other medical schools in the country, as one of them commented here, 'I would love a teaching post. It is my first priority to become an academic at this institution, yes, I would certainly be interested'. Prospects at UCT FHS do not look favourable for them and for that reason it would be best for them go back to where there is a greater sense of belonging and affinity. One respondent said, 'if they don't give me the job [at UCT FHS] I will go back to [her alma mater] to teach there'. The greatest attraction to UCT FHS, their sense of not belonging notwithstanding, seems to be its singular pedigree as a leading reputable training and teaching site. This perception is laid bare by the implicit comparison one of the registrars makes with 'other' institutions as she remarked that 'it is a risk [taking up a position at a historically black medical school] because if you look for other positions, they will associate you with a place

[the historically black medical school in question] that is deteriorating'. Implicitly, UCT FHS seems shielded from the deterioration she refers to, thus making it attractive as a site of choice for an academic career.

The level of interest in an academic career was, in general, more lukewarm, and this, it seemed, among others, had something to do with the unsavoury experience during the registrar training, as one of them, for example, commented, '[UCT FHS] doesn't really need me', adding emphatically that 'I would like to work at a historically black university because they would value me more. I would be optimally used. I am needed more by that community than here'. If experience at this institution swayed the aforementioned registrar not to consider an academic career at UCT FHS, some registrars in this narrative were equally not upbeat about an academic career at UCT FHS for other reasons, which, in general, bordered on the utility of the academic profession itself against the more seemingly high social status and financially rewarding careers like, for example, when working as a medical specialist in the private health sector. Financial considerations in particular seem the most decisive in swaying some in this group of registrars from an academic career, and not so much the weight of the unpalatable experience at UCT FHS, as is illustrated below:

Part time tutorials and demonstrations with students, yes, but no full-time teaching for me [then she bursts into laughter and says] I don't think they can afford me. I have sacrificed so much to get to where I am now, and I am now battling to[set] my debts off. I have lots of debts [Dr Ramokgopa].

With political and moral imperatives notwithstanding, financial considerations still made academia less favourable. While Dr Satyo went out of his way to rationalise the significance of blacks swelling the ranks of, hitherto, white academic environs and thus making a meaningful contribution to knowledge production, which at the moment was mainly framed by a white male experience, the expected financial rewards did not seem to be in concert with the sacrifices of many years of excruciating training:

My belief is that we as Africans have to stay to ensure that we take ownership of the intellectual project of this country. That will be the only time when we truly feel that we have taken over the institution. We need not keep it where it is, we must raise its standards. Otherwise we will forever be beggars – begging people not to leave our shores because we have skills shortages. In the long run, I have the intention of teaching. This must however be balanced with the immediate needs of the family. My

family is small. I need balance so that when I retire, they have enough to go on. But I certainly have an interest in teaching [Dr Satyo].

Dr Satyo's sentiments were echoed by Dr Tanga, who also saw the swelling of academic ranks by blacks as a necessary condition to foster change and, for that reason, she recognised that the institution is so 'desperate to get blacks'. Nonetheless, she excused herself from this responsibility, given the meagre financial rewards, even though she conceded that an academic posting will be more intellectually stimulating than working in the private health sector as a specialist. Her sentiments which represent an interesting paradox merits quotation at some length:

They are interested in getting people involved ...a lot of people complain about the money...the university doesn't pay, but, I'm also not a teacher. I'm just not that type. It is not for me...I feel bad because there is such lack of black academics. I know they are so desperate to get blacks, but for me, sorry, I can't do it [Dr Tanga].

#### ***6.11.1 The Designated Role of the Black Registrar to their Kind: A Practical and Moral Imperative***

Registrars in this key category recognised a need to remain and make a difference to future generations of black registrars in making the environment more hospitable for them. There was a felt sense that they 'should not experience what we experienced'. There was a need that they ought to be enabled to live up to their full potential once admitted into the system. However, this strong desire was not always met with a parallel commitment to stay on in the academy as will be demonstrated later. The recurring theme here was that although all was not well, it was still within them to find their way to better themselves and their kind:

[When you are around as a black academic] you can coach them [black registrars/ students]. You can just pick up a phone and say, hey you – just what did you do there! Next time they know better. That is what happens with the white folks. They are tipped to watch out for this and that. I think we should do the same thing to blacks [Dr Kgosi].

I have encouraged quite a lot of black people. After me, there has been a lot who have joined, I mean black registrars. They are learning in their own way, but it is much better for them now. I was sort of guinea pig, in a way. When the other black guy came, I gave him a whole box, filled with reading material that I had used. So when they arrived, I gave them my stuff and I showed them around. When things get tough, they call me [Dr Ramokgopa].

## **6.12 Employment of Personal Resources: A Survival Toolkit**

As explained already in the first narrative, and having ascertained the registrars' awkward sense of place (as they looked at the UCT FHS environment as one not entirely theirs), the purpose of this subsection was to find those resources at the behest of the black registrar, which are employed from time to time to counterbalance the state of feeling 'not at home'.

### ***6.12.1 The Enduring Qualities of Blackness***

As a means of surviving UCT FHS, registrars posited a dichotomy between white entitlement and black resilience. That is, while conscious of their 'outsider' status at UCT FHS, they reported that they were able to contend with this as they were prepared by their own 'black' background to do so. As the dictum went: 'we blacks are better able to deal with the stress than whites ... because of our harsh backgrounds'. In this instance, however, the deep felt sense of contentment about one's blackness and its attendant dividends not only served as an enabling and coping mechanism in an otherwise hostile white environment. Rather, it seemed more an act of affirmation of one's blackness. Here, although perhaps reified, blackness is ascribed social positive meanings as opposed to those meanings of deficit punted in the dominant narrative.

Given their 'harsh backgrounds', blacks tended to have very low expectations when entering UCT FHS. That is, blacks consciously internalise their 'guest' status upon entering UCT FHS so as to ameliorate the antagonisms that they might encounter while there. It must be emphasised here that internalising one's 'guest' status is a conscious social process which registrars deliberately embark upon for survival. The low expectations that blacks harbour about UCT FHS are often juxtaposed against the white sense of entitlement or the white 'commonsensical' and 'natural' sense of place – of home.

### ***6.12.2 The Efficacy of Black Social Networks***

Among other remedies for black registrars was the recognition that coalescing together as people with shared histories among whom there exists a relationship of trust, unlike with whites where 'you can't be sure about whether they are embracing you or not' was sensible and comforting. While information and experiences are shared in these informal social networks, the motif around which black registrars organise seems to be to put into effect a black sense of agency. That is, the understanding that a solution towards bettering their lot, necessarily, does not reside from without, but instead, from within. In other words, while

registrars give social support and share their frustrations, it is also about asking questions such as ‘what is our role and how can we make things better for ourselves?’ Critically important with social networks was the recognition that registrars as medical professionals needed to extend their networks outside of this profession for their own professional growth ‘as it makes you feel that you are not so special, but just a normal person – it makes me appreciate the little things in life’.

### ***6.12.3 Spirituality and the Family***

Family support in terms of the extended family, and where applicable, the immediate family, was seen as a vital source of support in coping with the stresses of UCT FHS. Spirituality, to be precise, Christianity, gave family support an expression, as one female registrar explains:

It always helps to pray. It [prayer] always helps me to be grounded. You always need support from family. My mother would phone me and tell me that we know that you are now writing your exams and we are praying for you. Things like that. So I always phone home at least once a week. You know, it might not mean much at that time, but when you are going through hardships, it sort of make you feel strong that there are people praying for you [Dr Ramokgopa].

Echoing the role of the family (immediate family) as a source of social support without necessarily linking family to spirituality was another coping mechanism by one registrar:

My life is stress free. I don’t have marital problems. I don’t have financial problems. If work is done, it is done. The support I get from home is very important. When people are not supportive, they usually demand a lot. They take something away from you. My wife doesn’t take anything away from me. That helps [Dr Lenkoane].

### ***6.12.4 Taking Stock of One’s Own Background***

Registrars’ own disadvantaged background propelled them to look at their ‘guest’ status at UCT FHS differently to what may seemed to have been the case with the hosting white community. By putting their ‘outsider’ status into perspective (that a return to where they come from is not an option) registrars simultaneously recognised their ‘privileged’ social positioning, notwithstanding their perennial ‘outsider’ status at UCT FHS. As one registrar put it succinctly, ‘you know who you are, where you come from and the conditions under which you were brought up, where you are now and where you want to be tomorrow – for me, that’s critical’.

### ***6.12.5 Being Rooted to One's Own Background***

The affective aspects of the registrar, coupled with a positive sense of self, were seen to be innate resources that registrars can, from time to time, employ in coping with the stressors of living and working at the predominantly white UCT FHS. The gritty determination to stay the course was seen as contingent on the registrars' positive sense of self, upbringing, and their strength of personality to withstand the obstacles.

### ***6.12.6 Personal Conviction and Positive Attitude***

While clearly most black registrars have a poor sense of 'at home' at UCT FHS, it was a phenomenon they did not celebrate, but one which they continued to mount a challenge against. In this instance, blacks refused to accept and internalise their 'outsider' status, hence they intermittently challenged the 'rightful' heirs to UCT FHS. Thus, as one explained, 'most of us stick around because we have this attitude that nobody owns this university. You don't pay my fees, and I would only leave when I want to'.

## **6.13 Registrars' Undergraduate Experience with UCT FHS: An Aid or Curse?**

Respondents who graduated from UCT FHS drew parallels between their undergraduate experience as it was then and their postgraduate experience (as registrars) which, in the main, suggested that they were not dissimilar. While it was not clear that English as a language was a barrier to social relations in the current situation, one respondent singled out the preponderance of English language as one socio-cultural factor that alienated him at UCT FHS. Here, the 'Englishness' and/or whiteness of UCT FHS were explicated as cultural expressions and forms that marred the registrar's undergraduate experience at UCT FHS. Prior experience and familiarity with the institution did not make it any less unpalatable in later life when he returned to the same institution for registrar training.

While Dr Satyo feels the same about the alienating 'Englishness' of UCT FHS (which is one of its most significant cultural and identity markers) as well as his expectation of prejudice and discrimination against the black 'artificial minority' by the white establishment, this was counterbalanced, in his undergraduate years, by a social activism movement. Many black students were part of this anguish which catapulted them towards self-affirmation. In his own words, the black student of his undergraduate days who formed the black self-help student society were 'ambitious and organised and they were not going to be deterred, looked down upon; [we] refused to be treated as inferior'. Such *esprit de corps* enabled one to carve a



place for oneself and thus mitigate the effects of discrimination and prejudice at UCT FHS. This reveals, therefore, that the undergraduate experience with UCT FHS does not necessarily place those registrars above the rest (i.e. those whose undergraduate medical training was received elsewhere). In fact, it was the experience of black students organising themselves as undergraduates that seemed more contributory to Dr Satyo's confidence and agency as a registrar.

We came at a very difficult time. I was someone of an activist in my days as student. I was one of the founding members of the Impilo Student society, which today is the biggest student society... . We founded that organisation. That should sort of give you an idea of the thinking then and what we wanted to do as students. Most of the things that they do today are still based on the same founding principles that we set at that time when we started the society. It must have been 1992 when we started the society and it was solely initiated by us because we were forced by circumstances of the time [Dr Satyo].

Dr Magagula's undergraduate experience at UCT FHS, however, was different and more positive. This can be attributed to her access to white social networks since, unlike most blacks, she came into the institution from a relatively privileged schooling background and did not have to go through the Medical Academic Support Programme (MEDASP)<sup>97</sup> curriculum. Since the mainstream programme put her at a far lesser proximity to black students than whites, she recalled that this made black students look at her with suspicion. Neither could she be fully part of the white social networks. At the time of the interview, she indicated that she now felt that discrimination and prejudice abounded (something she did not sense so overtly during her undergraduate years), even though it is almost always not possible to isolate specific incidents from racism necessarily.

A black registrar who had received undergraduate training at UCT FHS could be viewed by the white establishment with some approval, this does necessarily not reduce any possible incidents of discrimination and prejudice, it However, the view that conflates whiteness with quality and excellence was contested:

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<sup>97</sup> While the content of the MB ChB is the same for all students so that there is equality of outcomes, there was recognition that students who came from under-privileged background needed some kind of academic assistance programme to get them up to speed to the demands and rigors of the academic environment, hence the extended curriculum in the form of MEDASP. While those on the normal undergraduate programme will graduate within six years, the MEDASP students (almost exclusively black) graduated at the end of the seventh year, given the extra year of medical training to mitigate their schooling deficiency.

You see things like ‘this one is a UCT graduate, so they are better colleague than this one – they are better and professionally more competent than this one from Walter Sisulu Medical School or another historically black institution. And that is not necessarily so because the books are all the same – the systems and practice of medicine is the same. We may not be taught by the same mentors but I think again it’s a question of perception – you do come into the system – well, immediately when I say to people when they ask me that I was trained here, the assumption is that I must be good. People make assumptions not having seen what you can do and what you cannot do [Dr Magagula].

#### **6.14 ‘At Home’ or ‘Not at Home’: Black Registrars Account of the UCT FHS White Environs**

Following on the complex dynamics of black-white social interaction, the researcher here begins to illuminate the black registrars’ sense of home, and place. In elucidating the phenomenon of ‘at home’ and in place at the predominantly white UCT FHS, the researcher will enumerate an array of factors drawn from the data that attest to a lesser sense of home. In general, the black registrars’ displacement at UCT FHS is most apparent, and this may sometimes stem from the low expectations that whiteness has of blackness, as Dr Sobahle illustrates:

[Talking of the Professor’s secretary – the professor was Head of Department] she passed a comment as to say, are you going to be here next year? I didn’t confront her on that issue. To me it presented a very clear perception that as an African, it is known and expected that I’m not going to last for very long. Obviously, the secretary must have heard observed something, or heard something being said somewhere. So as an African, I am only expected to last for a year, in a program that last for four (4) years [Dr Sobahle].

For some, the UCT FHS presents many contrasts in that they may have a sense of ‘at home’ given dependable sources of support from within the establishment, that feeling of ‘at home’ may be soured intermittently since the empathic elements of the white establishment may not purport to represent the whole truth about the white UCT FHS. This is expressed ambivalently: ‘In a way, it is home, except that there still needs to be more changes for it to be fully home’. The paucity of black numbers is also seen as a drawback. That is, since blacks are too few in numbers, they did not see a reflection of themselves among those that they see on a day to day basis:

the environment [is] pretty frightening for blacks... The perception is fuelled by being conscious that I am coming into a white male dominated space – the feeling that I do not belong here [Dr Satyo].

Another registrar echoed the same sentiment that the feeling of displacement is owing to the negligible presence of blacks:

when I first came, it wasn't a welcoming place... It is a predominantly white institution. Very few dared to name the problem as racism, hence the feeling of displacement [Dr Leballo].

Another registrar added

I used to think that racism at UCTFHS was not true, it was just a perception. But, just look at the numbers of blacks admitted as registrars. So if you are not racist, why are you not producing enough black graduates who will come into the ranks of the registrar program? It reinforces the feeling that it is still a white institution. They only do the minimum possible to meet the equity quotas. That's where my feeling is and I spoke to Mawela [the only other black registrar in his department] and he shares the same feeling [Dr Sobahle].

He then proceeded to illustrate further the assertion that racism is rife at UCT FHS, hence the feeling of displacement – a lesser sense of feeling at home. This pertained to an incident wherein one black medical officer who was coming to South Africa on work visa to the main academic hospital at which he [Dr Sobahle] was working as he pithily explains the incident:

I tend not to complain too much. Racism is rife in other departments. You are sort of always reminded that you know very little. If you are quiet, they tend to interpret that as lack of self confidence [Dr Sobahle].

There were, however, exceptions that did accord race much significance, without necessarily implying any sense of utopia, in appraising their overall sense of home: at least one of them interpreted her sense of belonging in terms of the politics of hierarchy at UCT FHS. Not totally deriding that hierarchy, she commented that 'the hierarchy still remains, though the department is more relaxed ... It is a jolly atmosphere and we laugh a lot'. There is little (or no recognition) that race is explicated in relations of power, and thus in hierarchical structuring.

### **6.15 Summative Conclusion: Narrative Two**

As was the trend in the first narrative in respect of the respondents' own schooling and familial background, there was no discernable pattern in making sense of their disenchantment at UCT FHS. For instance, while they exhibited disenchantment with the

institution, there were variations among the registrars as to the extent of the disenchantment, with other variables such as institutional support, availability of social networks, and so on in shaping the nature and degree of the disenchantment. Most important to note is that while there clearly was disenchantment, it was nonetheless not predicted by the respondents' own background – neither familial nor by school type. It did not even seem to matter whether registrars were alumnae of UCT FHS or not; nor whether they attended historically white medical schools and therefore were predisposed to white environments.

As has been indicated in the preceding paragraph, registrars in this narrative were all disenchanted albeit to varying degrees. Hence, there was also notable difference in terms of how they dealt with their peripherality at UCT FHS. For instance, while the respondents in the second narrative sought to carve a role for themselves as transformative change agents in a hostile territory and had every intention to mount a challenge at the prevailing hegemony of whiteness, respondents in the first narrative were so disenchanted that even their agency waned. The status quo, although unpalatable, was deemed to be almost a 'naturalised' state of being, without any hope of it ever being changed, hence there seemed to be no interest in pursuing an academic career within the institution and its associated academic hospitals.

The narrative also foregrounded a paradox wherein there was a strong desire by the registrars to challenge the status quo head-on while at the same time employing measured tones so that they do not antagonise their white hosts. For instance, in their effort to stake a claim and feel a sense of belonging, they try to be 'reasonable and not to complain a lot'. Also, they tried to shed the burden of seeing and feeling racism through avoidance – that is, psyching themselves up into wanting to believe that racism does not exist until they were reminded periodically of their guest status by their white hosts, through, for example, an alienating dominant culture (and its symbols) and having their expertise seen in racial terms by their white colleagues. Unlike respondents in the first narrative, however, respondents in this narrative enjoyed some measure of institutional support. This seems to converge with the other important observation that most of them also enjoyed the benefit of active middlemen who facilitated entry. Although there is recognition that there is a disconnect with the institution, it is prudent to acknowledge, at the same time, that there is a range in the disconnect in that it is not experienced at the same level by all the registrars.

## CHAPTER SIX: PART THREE (Narrative Three)

### Plain sailing navigators: ‘Racism! I don’t know what you guys are talking about’.

#### 6.1 Introduction to Part Three (Narrative Three)

The third narrative represents what the researcher refers to as colour-blind black registrars. This group represents the smallest category given the registrars total sample of twenty-one. Unlike respondents in the first and second categories that accounted for race in different ways, respondents in the third narrative purported an ‘inability’ to see race. Respondents here were not looking at the next earliest opportunity for an exit (unlike some in the first narrative), nor were they dedicated change agents (as were those in the second narrative). Rather, they felt a sense of affinity with UCT FHS and considered those black registrars who viewed the environment differently from the way that they did as being the source of the problem. In other words, instead of laying emphasis on the agency of blackness and white racism, they referenced blackness as the problematic while rendering whiteness invisible.

*Figure 8: Narrative Three Respondents*

Name	Schooling	Gender	MBChB
Dr Mzobe	Former Model C	Female	HW - MS
Dr Mangope	Former Model C	Female	HW - MS
Dr Sotonga	Former DET	Male	HB - MS
Dr Baloyi	Former DET	Male	HB - MS

#### 6.2 The Intersection between Family (and Community) and School

As is evident from the above table, the two female respondents share a similar class position while the other two respondents (male) came from a working-class background. This also coincides with the type of medical schools at which they received their initial medical training. The two male respondents from working-class backgrounds received their initial medical training at historically black medical schools while the female respondents from petty bourgeois backgrounds had their training at well-endowed historically white medical schools.

Families (as was the case with respondents in the past two narratives) play a notable guiding role. However, depending on the prevailing dynamics of the family’s class position at a particular time, there are stark differences in what motivates a particular family in giving

guidance. It is noted from the data that working-class families' motivation in performing steering role seems more utilitarian while the bourgeois family's motivation, while also utilitarian, were also symbolic. Put in another way, while working-class families looked to a career in medicine as a stepping stone for the family to step out of the ravages of their current lowly class position, the bourgeois families maintained a strong mentoring role so as to reinforce the family's line of succession in elite professional fields such as medicine. That is, where there was a doctor (or others in recognisable professional fields) in the immediate or the extended family, the parents always look to the children to take up the baton. In families where there were few people in professions, the parents also steered their children in the direction of medicine (or other elite fields) having their sights on the dividends (social and economic) associated with the anticipated achievement. Consider the following comments from two registrars:

When I was a child, I wanted to be a teacher. From Standard VI, I started doing well [at school]. So, my father wanted me to be a doctor. He wanted us to be doctors [her elder sister is a doctor]. My uncle was a doctor....I am the youngest in the family [Dr Mzobe].

You know I come from a family where my mother has never been to school. My father had been to school up to Standard IV, but he took his youngest sister to school. She became a school principal and now she is retired. So when my mother got married, she saw my aunt going to school to teach and she was getting a salary..My mother used sit on my neck and forced me to go to school. She played a big role. In those days, things were tough...I had wanted to be a doctor since I was doing Standard III. I was motivated by one guy called Dr Letlalo. He was the only black doctor around at the time [Dr Baloyi].

The family, in addition to being role models in the community, is thus an important institution on which registrars have had to depend, and this is independent of its social (class) positioning given that although the registrars view about race seemed almost similar, the same kind of thread was not evident at all when it came to their socio-economic backgrounds. Respondents in this narrative appraised schooling differently depending on the type of school they attended, i.e. whether they attained their schooling at a formerly white Model C environment or at an underprivileged school, formerly under the auspices of the Department of Education and Training (DET). While there is clearly a utility value given to both subgroups (Model C and DET), there were nonetheless notable differences of emphasis. For instance, while those who were at a DET school looked up to schooling as a necessary

passport into the medical school, the former Model C registrars went further, and waxed lyrical about the high quality and efficacy of their schooling. That is, they (without any prompting) acknowledged their privileged education, the utility of their familial networks, and expounded a view of schools they attended as socio-cultural institutions of some sorts. The excerpt below best illustrates this point:

We had the benefit of what other kids did not have. We did not experience the old DET syllabus. And because we were in a multiracial school, 99% of our teachers were white and there was no corporal punishment, none whatsoever! We were in a lovely school. It was beautiful.... There was time for physical education. Time for arts, we were at the laboratories, we went to the libraries. There was time for music. We had a music subject. We had sport days. We raised funds. We did Joseph and his dream-colour coat. We did *Jesus Christ superstar*. We did *Oliver Twist*. We used to perform drama at the end of each year. We had Christmas carols and parents would come at the end of each year and we have shows. We made sure that at the end of each year there was a show – this was from primary school until high school...it was very inspiring. A teacher had time....I was just saying to somebody that what the government is proposing [Outcomes Based Education], you know you need time, and you need resources. At the school I was at, we had resources. We were taught by the people who knew this [OBE]. That is what white people have been doing for years. They knew that you didn't need to be violent and brutal when you were teaching – you can just talk... It was very nice...cultural evenings encouraged tolerance and harmony in the school. So it wasn't like a Christian school. Everybody was respected, their culture and so on. It was really an eye opener... I remember when I was in Standard V and we were doing a project on what was happening in our lives. I did a beautiful project on being a psychiatrist. I wanted to be a psychiatrist [Dr Mangope].

In the case of Dr Mangope, the school is assigned positive descriptors such as 'beautiful' and 'lovely'. It is presented not as a place of regimented formal learning but as a cultural hub in its own right, given the extent of socio-cultural activity that seems a very vital part of school life. On the other hand, as evidenced in Dr Baloyi's account of his former DET schooling background, schooling is assigned less positive descriptors, where it is scantily recognised as, for instance, 'nice', there is not any accompanying level of detail to narrate the 'niceness' of the school as it is the case with Dr Mangope. Instead, an emphasis is made regarding a person from whom he got the most encouragement to pursue school and this resource, in the form of Dr Letlalo, was outside of the ambit of the school. Notwithstanding the vast differences between their schooling backgrounds, it did seem that these disparities did not, in any significant way, determine how they ultimately experienced UCT FHS, as black registrars in

an environment thought by other registrars (in the first and second narrative) to be hostile to them as the ‘other’, as shall from now be demonstrated in the sections to follow.

### **6.3 Existing Internal Networks at Point of Entry**

As alluded to in the previous two narratives, it is important to lend a closer gaze at the availability of social networks at point of entry and their effect in the subsequent academic life of black registrars. Since all the four respondents could be best described as ‘colour-blind’, could this be attributed partly to any social networks that they might have operated in, giving them positive UCT FHS experience that is not mediated or shaped by their race? Three out of the four respondents in this narrative have had the benefit of active middlemen who were either still at UCT FHS or had already completed their specialist training but had maintained their own network of powerbrokers at UCT FHS. The only other registrar who had had no intermediary facilitating her entry into the institution was also advantaged in that she received her basic medical training at UCT FHS, and therefore there was some familiarity with its academic and social environment. As in the case of another ‘colour-blind’ registrar, she had been actively recruited even when she was still an undergraduate medical student, on the verge of qualifying as she enthuses: ‘I called [the department] to find out if there were positions available and I knew that there would be something because in my final year, they were telling me that I must come back and specialise’. The rest were encouraged by mentors and peers who, as UCT FHS alumni and having also specialised at this medical school, had valuable contacts. The case of the other two registrars, below, best illustrates the point as they had not had the benefit of prior insight of the UCT FHS as they received their initial medical training at historically black medical schools:

When I finished, he [referring to his long term mentor at whose medical practice he had done locums before and had also specialised at UCT FHS] proposed that I come to Cape Town to specialise in his department. He was always encouraging me to come and start the registrarship. Dr Mokwae, who came here, and I had to look after his practice told me that there was a very good training unit here. I applied all over and he said, “No. You must apply to UCT”. I then submitted my application and the professor just called me one night to say I must come to UCT. She said, “You will do Senior House Officer<sup>98</sup> job for six months and after that, you will enrol as registrar”. I worked at Raapenberg hospital and after a month I was converted to registrar [Dr Baloyi].

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<sup>98</sup> Senior House Officer is a medical ranking between a junior doctor and specialist registrar position. Here, a SHO position is used as a stepping stone in preparation for a specialist registrar position.



There was a person I already knew, a personal friend of mine. We had been to the same medical school. He was a specialist already and had completed his specialist training here [at UCT FHS]. He encouraged me also to come here [Dr Sotonga].

While all but one of the registrars clearly enjoyed the benefit of some social network at the time of negotiating entry into UCT FHS, they still had to traverse the institutional minefield on their own and create new social networks that would offer them the necessary professional and social support. No doubt their effort as active social agents is important, but it is quite striking to the extent to which these registrars had facilitated entry.

#### **6.4 Social Interaction**

At the heart of social interaction in the third narrative is the emphasis laid on the role of the self (within which is presupposed a certain kind of active agency) and cohort camaraderie (made practicable through actual physical space at work). In the former, narrative, three registrars pointedly emphasised the role of the individual registrars and their demeanour in traversing UCT FHS, inferring that this, perhaps, led to a more cordial reception by the UCT FHS establishmentarians. Here, the onus is on the black registrars, as active social agents, to be seen to be conciliatory to UCT FHS insiders. These insiders were able to feel at home at the institution because of cohort cohesion, in which individual registrars of one particular cohort used this as a bonding mechanism as opposed to other social markers of difference such as race, gender and language. Here, it matters not that the registrars are of a different religion, class, and race. Some of the bonds could also be traced back to the undergraduate class. Therefore, both agency and cohort camaraderie facilitated social interaction between and among registrars, thus seemingly eclipsing the other more profound markers of social difference. To emphasise this cohort camaraderie, one of the registrars, mentioned that:

It really depends on the way you look at it. I find the registrars – the whites, the Indians and the blacks to be a very good group. They were also folks in my final undergraduate year. Some, we studied together at undergraduate level. So I think much depends on who you are rather than the colour of your skin. The same happens with senior registrars. We rarely ever hang out with them. They came at the same time, and they stuck together [Dr Mzobe].

In accounting for supposedly stymied black-white social relations, Dr Mangope very sharply highlights the role of active human agency (the role of the self). She suggested in her interview that the discord, for example, between black doctors and other doctors, as well as

between them and the nursing sisters (the majority of whom are either Coloured or white) may be explained in the terms of the black doctors' propensity to pull rank, perhaps as a defence mechanism against what they perceive to be a systematic onslaught against their kind. As a result they needlessly remained on a high racial alert:

I don't know, as registrar you just go in and introduce yourself, and so far I haven't had a problem with anybody. I think it depends on how you treat the next person. I remember there was a time when I was talking to one nurse and everyone had said, you know, she is very rude. I just had to talk to her in a certain way and right now we are friends. We can talk about the issues. I think it has to do with your personality. You know... the kind of person you are. I think people can feel your energy. When you are not sure who you are... eh, most nurses that I speak to I would say when you have a problem with a doctor, then you must speak to him. They [the nurses] would say that the doctors don't want to listen. They would shut them down. Even when the sister is suggesting something [valuable], they don't want to listen because they are the doctors. Once you do that, you will have problems. So it also depends on how you relate to other people [Dr Mangope].

This assertion by Dr Mangope presupposes a somewhat changed space in terms of black-white social relations wherein the scales are wholly tipped in the black registrars' favour. This ignores the staying power of whiteness in general, and in particular, the racial pyramid which, in the South African public imagination, remains an inextricable part of social reality. This contention of Dr Mangope is one that elevates the individual above his/her racial group. In other words, what Dr Mangope suggests is that group membership has few, if any, social consequences while the reverse is true of individual effort:

...as long as you are sure of who you are as an individual, you are active listener [prepared to hear the other side] - people can feel your energy traversing UCT FHS will be easy, irrespective of one's race. In that way social interaction is enhanced [and you should have no problem] [Dr Mangope].

Overall however, respondents seemed to appraise social interaction between black and white registrars positively. Any negativity was largely explained in terms of certain social 'inadequacies', mainly on the part of the black registrar – in total contrast to the accounts of black registrars in the first and second narratives. For example, a registrar from the same department but whose narrative is found in the first group spoke of their department's annual social gathering in completely indifferent ways:

Most of the time, you meet when you are at work or you are attending class. But at least we meet once a year when we have a registrars' party and all the hospitals will be covered by other personnel. It is once a year. It is quite a good occasion. Those who drink would drink without having to worry about going back to work that day. It is quite a good occasion [Dr Baloyi].

By way of contrast, one of the doctors who was also from the first group, described the same event very differently:

We will arrange sports days or end of the end of the year functions by the department – you go there and you feel totally out. You are just one there at a corner. You can't even fit in one discussion. Sometimes they just go into Afrikaans and you get totally lost [Dr Ratshitanga].

In encouraging social contact between themselves and their white colleagues, black registrars in the third narrative placed emphasised on the self and not their being part of the larger social system. The black registrars were expected to be pragmatic and conciliatory, while the white posture was considered unproblematic, normal. Whiteness in this case was made invisible and therefore exonerated from any fissures in human relations at UCT FHS. In conclusion, while it is important to restate agency as significant, it is also proper to point out that cohort camaraderie was seen by this group of black registrars as a mechanism through which they have been able to forge amicable social bonds with their white colleagues. Hence, unlike registrars in the first and second narratives, these registrars claimed a sense of belonging, of place.

### **6.5 Dominant Culture, Traditions, and Symbols**

Unlike the registrars in the first two narratives, the four registrars in the third narrative were reluctant to characterise the institutional environment in terms of its strong identities of Englishness and whiteness, and its cultural rootedness in Europe. At any time when UCT FHS's whiteness and Englishness were mentioned, the respondents did not seem to see this necessarily as a problematic. For instance, although Dr Sotonga saw the institution as 'definitely white', its whiteness apparently seems unproblematic as it was watered down by other markers of an institutional cultural makeup like 'things [being] up to standard ...the [high quality] of training and facilities'. Here, the higher 'standards' are an intrinsic part of the local culture and traditions at UCT FHS and not simply the affective aspects of its environment that give an actual account of life at the institution.

Registrars in this narrative seem disinclined to name and use race as a marker of difference, which ultimately shapes their experience in a particular place like the UCT FHS. There were, nonetheless, marked contradictions in respect of their experiences (they intermittently and explicitly often cast race as a catalyst i.e., as shaping those experiences). For example, Dr Mzobe remarks that ‘if you look at the demographics now, you can say the culture is still very white and English, especially at the medical school. I think we need more blacks than white’. While it could be inferred that equity considerations, diversity of the medical class, and culture may suggest an increase in the black numbers is necessary, her remark seems to contradict her earlier comments in which she viewed black marginality as a perplexing phenomenon with a rhetorical along these lines: ‘why do they say they feel alienated’? It is a kind of contradiction that seems to, on the one hand, subtly critique whiteness, while on the other hand, querying whether in fact blackness occupies a marginal space and is thus alienated.

### **6.6 Medico-scientific Culture and its Supposed Innocence**

While respondents in the first and second narrative strongly contested the medico-culture rationalisations shown in attempts by some in the establishment to lift the science out of the human person, the colour-blind registrars in the third narrative seemed sympathetic to what they merely saw as ‘pressures’ that are part of being a medical professional. Here, they were, of course, referring to the hustle and bustle of being in a scientific occupation, more so, a medical profession, which is not always amenable to good physician-to-physician relations, hastening to emphasise the point that manifestations of such ‘pressures’ are colour-blind since they may, at times, strain white-to-white physician relations:

What puts a lot of strain is that we are dealing with lives and if you make a mistake and somebody dies, then it puts everybody under pressure. So you need to be in your toes and unfortunately, when somebody is under pressure, we also carry the pressure. I think it is across the board. You do see a situation where white registrars and consultants do that to other whites [Dr Baloyi].

### **6.7 Institutional Support**

Unlike respondents in the first and second narrative who did not look at institutional support of their training favourably, especially as it specifically related to the Heads of Department (HoDs)/divisional heads and consultants (who are almost exclusively white) and fellow registrars (white), respondents in the third narrative were far more positive about the extent of

the support they receive from the institution. They unequivocally attested to overwhelming support from the institution through their designated HoDs and often this help extended beyond the bounds of academia into their personal lives:

He was very much student-oriented. He would try and make sure that you were comfortable. He would even help you settling in, you know, trying to get accommodation for you. He was very helpful. The consultants were also very helpful. They were very nice, they were not nasty [Dr Mzobe].

Her registrar colleague in another department concurs, emphasising the singular role of his HoD, 'the Head of Department is very supportive. I'm sure if it wasn't for her, I wouldn't have stayed'. Dr Baloyi too echoed what looked like guaranteed support from his HoD as he recounted, 'well, if you go to the Head of Department and say I have this problem; you know; it is just that people are scared of approaching her [the Head of Department]'. Overall, nowhere is the extent of institutional support more poignant than in Dr Mangope's short generalised account: 'Right now I would say that whoever that has had an impact on my life here, they have done everything absolutely right'.

It is important to highlight here that while registrars experience of the HoD's support is varied, the HoDs often referred to in all the three narratives tended to be the same. For example, while Dr Ratshitanga in the first narrative characterised the HoD's support as almost non-existent and relied more on support from other black registrars, Dr Baloyi gave a different account of that same HoD. To him, there was no question that the HoD acted in the best interest of registrars and gave them her wholehearted support when warranted. Similar parallels could be drawn also from Dr Tanga (second narrative) and Dr Mangope. While the former seemed neutral as to the extent of the HoD's support, Dr Mangope's opinion of that same HoD was overwhelmingly positive. It does, therefore, appear that these differences in experience may be significantly explained in terms of identity construction processes of black registrars. In that regard, those that sought to recast their identity as 'insiders', they seemed to have a positive feel about institutional support while those that had accepted their 'guest' status experienced the same HoDs as non-supportive.

## **6.8 The Phenomenon of Racialised Expertise**

All but one of the respondents in the third narrative had had no experience with their expertise being racialised either by colleagues or patients. In other words, they did not think

that their race in any way influenced the judgement of others as to their clinical competence. However, on those occasions that race mattered, it did not as a result of the obtrusive white centre, but rather from those sections of the UCT FHS that are peripheral, such as from black patients and coloured nursing sisters as described by the two registrars below:

Race matters to some people. For some strange reason, I think our coloured nursing sisters still have a problem and this goes to patients as well. When our coloured patients go into the ward, well, I always go into the ward with my white coat so that they can identify me. But usually, they would just pass you and not even greet you and when the mother tells them [the family coming for visit] that that is the doctor who was operating on me, they sort of, cringe. You know, you are human being before you are a doctor. In my culture you must acknowledge people by greeting them. That is the problem that we have here [Dr Baloyi].

The black patients would sometimes prefer a white doctor than you. They are more comfortable with the white doctor than you. I used to encounter such things at the hospital [Dr Sotonga].

In terms of racialising one's expertise, there was this white doctor-black doctor and black doctor-white nurse matrix. Here, for example, racial ordering (and here this signifies the staying power of whiteness) is seen even in such situations where a nurse, who, in the order of hierarchy ranks below a doctor, purports to make nonsense of the sacrosanct professional hierarchy that guides the doctor-nurse relations. For instance, in the quote below, a white nurse apparently wielded so much power that this resulted in a qualified black doctor resigning from the registrar programme:

There was also an issue with one white nursing sister. I was not personally involved. The doctor [the black doctor] was accused by her of not knowing anything, and this doctor subsequently resigned. He is now working in Pretoria [Dr Baloyi].

## **6.9 The University and the Geopolitics of the Host City (and province)**

Respondents acknowledged that there were certain specificities about the host city (and the Western Cape province) because it is the only major city in the country in which blacks are a minority, and thus racism is seen to be pervasive. However, the registrars in the third group were ambivalent about such racism claims and the suggested causal links. For example, while one registrar acknowledged that 'UCT FHS is a sample of the Western Cape (the host province) [and] Cape Town', she simultaneously hastened to add (as though to sanitise her

earlier point and downplay the enduring essences of race and racism while on the other amplifying blackness as the problematic):

But you know, I haven't really experienced that. When I was here, yes [as an undergraduate student], it was different, but it did not ruin my life. I realised that black people were howling but there was nothing going forward. I then decided that I must do something that would be of benefit to me. I haven't really experienced racism. Maybe it's by osmosis. I was just jolly and going on with life [Dr Mangope].

Like Dr Mangope, Dr Sotonga implies a weaker link between the university (UCT FHS) and its host city (Cape Town). In other words, while there may be racism in the city, this did not necessarily mirror his experience at the institution as registrar since, as he put it: 'where I'm working, things are fine, but Cape Town in general is like that [it is racist]'. For instance, while he had not had any 'problems' at UCT FHS as registrar, he 'used to do locums and saw that white patients tended to think twice [about being seen by him]'. The same doubts about his competence were also self-evident among white nursing sisters. As a consequence, and unlike Dr Mangope, he does not see blackness as a problematic, but rather as a kind of comfort zone, as he explained, 'it is better to work in facilities where there are black clients like Gugulethu and as they show respect there'. This is in contrast to his experience of clinical practice in the city with a mostly white clientele where 'they [the white nurses, patients alike] would analyse everything that you are doing'. So while there is greater propensity to not see race and racism, there seemed to be a range of experience in this regard, with some seeing race and racism at one time and on the other, claiming to see nothing at all.

#### **6.10 Black Registrar Victimisation (or Victimhood)**

There is no trace of any experience within UCT FHS from which victimisation can be inferred (and neither did the registrars themselves see in any of their many accounts evidence of victimisation). Here, there was no sense of wilful and vengeful commissions by the establishment against black registrars. This is in stark contrast to the experiences of the registrars in the first and second narratives. This therefore may again explain the level of contentment with UCT FHS. In fact, there seemed to be a view that blacks were simply preying on their newly acquired victim status, and to an extent were abusing it. In effect, the preceding quote from Dr Mangope highlights this 'false' black victimhood, and here, this researcher took the liberty to repeat it to illustrate the point:

I realised that black people were howling but there was nothing going forward. I then decided that I must do something that would be of benefit to me. I haven't really experienced racism. Maybe it's by osmosis. I was just jolly and going on with life [Dr Mangope].

Dr Baloyi commented along similar lines in dismissing the idea that black registrars are victimised principally on account of their race:

White registrars and consultants do that to other whites. For me I have never witnessed it – you'd hear people saying so and so is rude, and then you get your rotation and you work there and you don't see anything like that. The thing is that we also have to be willing to check ourselves. I cannot do a mistake and expect not to be told that I am going astray – and then complain simply because I'm black. Some people would not take it – you know people who don't want to take the blame. They find it very difficult to say sorry [Dr Baloyi].

### **6.11 Academic Career Prospects**

While registrars in the third narrative are among the most 'happy' of the three groups, unlike those in the second narrative, they seemed the least inclined towards academia. This demonstrates clearly that a positive experience with the medical school does not necessarily lead to one being positively inclined to a future academic position at UCT FHS or elsewhere. While the most 'happy' group was overwhelmingly negative about a career in academia, such an appraisal does not in any specific way narrow down the problem to UCT FHS. Reasons varied from 'but academics are underpaid and really don't look happy at all!' to 'no! I am not that kind of a person, I don't want to come here and do research. I am a worker. I do hands-on work'. Nowhere, however, is this disinterest better demonstrated than in the following comments by Dr Mangope, who is on the verge of completing her registrarship:

No! In our department you see people obsessed with research. I always tell them that I am not a researcher. I am not an academic. That is one thing that I have realised about myself. I am a physician. I am a practical person. I believe in doing things – I am hands-on. I am not academic [Dr Mangope].

It is intriguing that all four registrars, although content with the social and academic environment at UCT FHS, are not interested in an academic career. Because these registrars are 'happy and have still decided against an academic career, either at UCT FHS or anywhere else, one need not presuppose that registrars in the other narratives were disingenuous or untruthful in citing race as well as generally not feeling 'at home' as the reason why they would not consider a career in teaching. In fact, the predominance of race in



their decision did not preclude other factors such as low salaries, unattractive lifestyle, heavy workloads and so on.

### **6.12 Employment of Personal Resources: A Survival Toolkit**

While registrars in the third narrative (like those in the second) punted the role of the self (positive attitude), religiosity (spirituality) and the family, there was more emphasis on the need for the black registrar to be pragmatic in traversing the white UCT FHS. Being pragmatic implied adapting to the different styles, habits, and idiosyncrasies of white colleagues with whom they work and meant that 'you should just try and get along with people you work with because it can get unbearable otherwise'. Adaptation, as another registrar remarked, comes with time since one needs an extended period to get to know the varying habits and personal preferences of one's colleagues. A classical pragmatic approach to traversing and being at ease with whites is explained thus by one of the registrars:

You sort of know the bosses that you can work with. With consultants, you'll know that this consultant needs this, and that one needs something different. So you sort of know the personalities and their personal preferences. There are consultants who do not believe you must rupture membrane when the woman is in labour and there are those who believe in the opposite. So you work according to what each consultant prefers. You don't get caught in between. But when you are still new, you will not know these things. You will get confused because you are getting conflicting messages and you will feel humiliated because you did not know [Dr Baloyi].

The family as a social institution and his faith appeared, however, to have been effective panaceas to potential hardships. Religion here (and in particular Christianity) offers perceptive lens through which world, its wonders as well as its excesses, can be understood. Dr Baloyi's commentary on the role of the family and spirituality, and how these anchor part of his life as a registrar at UCT FHS, deserves quotation:

One thing that keeps me strong is that I am a born-again child of God. I am probably one of the happiest registrars in the department because I know where to cry to when I have problems. You can go to anyone of the registrars and ask if they had had problem with me, I doubt if they will say yes. I don't have a problem with anybody and I value life and after life. My wife is also a born-again child of God. We go to church together. We pray together and come back happy [Dr Baloyi].

### **6.13 Registrars' Undergraduate Experience with UCT FHS: An Aid or a Curse?**

Two of the four registrars attained their initial medical training at UCT FHS, while the other two attended their undergraduate medical training at historically black medical schools, one in a rural heartland, the other located in a major South African metropolis. The even spread of the registrars in respect of their undergraduate medical school affiliations suggests that a prior familiarity with UCT FHS (while this had in itself utility value) does not necessarily mean that outsiders (given that they studied their undergraduate medical degrees elsewhere) may not necessarily have a favourable experience at UCT FHS. The response to their registrar experience at UCT FHS is positive. This then matches with the positive view of their undergraduate experience at UCT FHS. For instance, Dr Mangope enthuses about the undergraduate experience at UCT FHS, saying, ‘I did not feel lost. I think my schooling prepared me well for this because we were trained to be innovative and independent’. Ironically, however, she spectacularly failed her matriculation examinations. It was, therefore, not the Model C schooling that saw her successfully through the rigours of a matriculation examination for the second time. Rather, it was at an underprivileged former DET school that she passed the matriculation examinations with sufficient grades to qualify for medical school.

Unlike most of the registrars in Narrative One and Narrative Two, the two respondents who were at UCT FHS for their undergraduate medical degrees reported a positive undergraduate experience and a high level of academic and personal support by senior academic staff.

#### **6.14 ‘At Home’ and ‘Not at Home’: Black Registrars’ Account of the UCT FHS Environment**

People here are very nice – very nice people. That’s one thing that made me comfortable here. It is because of the staff. They make you feel at home [Dr Sotonga].

The above caption captures the essence of the appraisal of the UCT FHS environment by respondents in the third narrative, notwithstanding the occasional racial disquiet for which they blame the black registrars. In agreement with Dr Sotonga, Dr Mzobe seems almost perplexed at the suggestion put to her that others have expressed grave reservations about the UCT FHS environment, as they found it hostile and alienating. Her response was one of bemusement:

Why do they feel out [saying it with a probing smile] ? It is odd because I did not really feel out. There are different student societies like women's organisations, black students organisation, though I'm not sure if it's a good thing [referring to the black student societies]. There are different student societies if people feel they don't belong. Are there people who feel that way? [Dr Mzobe].

Although registrars are, in theory, postgraduate students of the university and can partake in student activities as any other student, the reality is that they are also full-time government employees – they are part of the Provincial Government of the Western Cape's Department of Health as full-time medical personnel. They do not really see themselves as part of the ordinary student folk on the bigger campus (or even at the medical school). So while Dr Mzobe's idea that they can join student societies to ameliorate their marginal status may be theoretically possible, it is not practical given the peculiar circumstances and nature of registrar work. However, she also raises a second point – she is half-hearted in respect of black solidarity as a mechanism to counterbalance its felt sense of marginality at UCT FHS. She does not, however, elaborate on her misgivings regarding the felt sense of black marginality, except to cling onto her colour-blindness.

### **6.15 Summative Conclusion: Narrative Three**

Following the trend from the first and the second narrative, the researcher concludes that with the third narrative, there also was no discernable trend in which the respondents' familial and schooling backgrounds could explain their racialised or non-racialised experience at UCT FHS. The finding also confirmed by the third narrative is that the registrars' sense of belonging was not circumscribed by their own backgrounds, whether family, school, or even the type of medical school at which they attained their initial medical training. For instance, while the registrars' contentment with the institutional environment is evident, this comes against a background of familial and schooling experiences that are hardly uniform. For example, while two of the registrars hail from privileged backgrounds, the other two were from pure working-class backgrounds.

There were, however, points of convergence among the four registrars in this narrative that made them cohere as one distinct group. Almost without exception, this group of registrars had benefited from services of active middlemen, either as academics within UCT FHS and/or as acquaintances outside the UCT FHS but with closer ties to some of the gatekeepers within the institution. This may then account for the cordial reception and subsequent

institutional support the registrars claim to receive. In fact, of the three groups, this third group of registrars were the most satisfied in terms of institutional support, hence perhaps their claims to have seen no racism. Of course, there have been those, especially in the second narrative, who seem to have been supported in the same way, but still recorded high level of disenchantment with the institution and, attributed this to race. This will be problematised in the Discussion Chapter, through the employment of CRT in deciphering this act of seeing no colour. With leanings to abstract liberalist ideology, this group tended to water down accounts of racism by other blacks by instead overemphasising individual agency and effort, and thereby chastising those blacks who saw colour (and racism) as un-pragmatic and perhaps oversensitive. Most concerning, however, is that the high degree of contentment could not be translated into a high interest in an academic career, as all of the four registrars rejected the possibility of entertaining the academic profession, save to mention that this bordered more on the negative appraisal of the academic profession itself rather than the environment (which they found fairer and more supportive).

## CHAPTER SEVEN

### **The White Academic Members of Staff in Loci: The Standard Bearers' Experience of the UCT FHS**

#### **7.1 Introduction**

Although this thesis is about deciphering the life experience of blacks in a predominantly white environment (as has been motivated in the methodology chapter), this researcher deemed it necessary for a small sample of white academic staff to be included as a means of ascertaining the presumed sense of ownership of the institution by whites in contrast to the perceived status of blacks as guests. Rather than interviewing white registrars, this researcher chose to look at white academic staff, given their higher placing in the University's social hierarchy.

The chapter begins by establishing the efficacy of the subjects' social capital through looking critically at their familial and schooling backgrounds. Data will show that the white respondents benefited immensely from these two institutions and, to a great extent, these contributed positively to their career choices and thus boosted their life chances. This chapter will indicate that despite overall satisfaction with UCT FHS in terms of institutional support, availability of internal social networks and cordial social interaction with colleagues, there exists what the researcher elects to delineate as the white peripheral centre. This is a space occupied by whites which, although it remains firmly part of the centre, appears nonetheless removed from the core. In short, this indicates that some whites felt peripheral, not so much on account of their race but on other grounds, such as disciplinary affiliation, religious affiliation, school type, and even gender. For example, in respect of disciplinary affiliation, the data suggest that non-medical academic members of staff do not feel a full part of the UCT FHS. As to religious affiliation also, there is a feeling that Christian whites who attended certain exclusive Christian private schools were by design destined for success and to occupy academic leadership and executive roles at the institution. In the final analysis, the researcher will argue that the phenomenon of white peripherality is insignificant, since it fails to disqualify whites totally from the centre into the periphery, thus confirming the staying power of whiteness.

**Table III: White Academic Members of Staff**

<b>Respondent<sup>99</sup></b>	<b>Gender</b>	<b>Academic Rank</b>
Paul-Gibson	Male	Associate Professor
Maritz	Male	Professor
Groenewald	Female	Associate Professor
McKinnon	Female	Associate Professor
Rosenthal	Male	Professor

While the study was focused on the black experience in white milieus, this researcher thought it necessary to use a small sample of white academic staff to tease out their sense of place in the institution vis-à-vis that of black registrars. The researcher interviewed white academic staff members rather than white registrars because of their seniority in the social hierarchy of UCT FHS. Five academic staff members were drawn from a random sample. The researcher had extensive interviews with these.

The two white women that are in the study are associate professors, thus of a lower academic rank as neither held a senior specialist or head of department and/or division position - a trend that is reflective of the general statistical profile of UCT FHS. The three others in the study were white male academics, two of whom were full professors, with one occupying the position of a senior specialist as well as head of department. The other senior professor is a specialist in his field and had occupied the position of head of department before in the same department. The remaining white male is an accomplished researcher, collaborating with one of the institution's revered A-rated scientists, and it seems only a matter of time before he, too, is appointed a full professor. All these five respondents have been with the institution for an average of at least fifteen years. Hence the presupposition here is that they are part of the establishment. This was also a purposive sample as the researcher ensured that, although small, it included white women.

## **7.2 Intersection between Family (and the Community) and the School**

While it may be possible to surmise that, given their advantaged schooling relative to that of blacks, whites will generally view this positively, in this case however, it did not seem so. Overall, white academic members of staff displayed and expressed very little affinity with their schools. Descriptors assigned to their schooling experience included: 'hate', 'school hierarchies', 'rigidity', 'trauma', and 'nightmare', among others. In recounting their

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<sup>99</sup> In order to protect the individual identities of the respondents, the researcher used pseudonyms, as was the case with the registrars.

schooling experience, there were a number of uniform responses, almost all not positive, as the one below illustrates:

I didn't enjoy school very much. I was a bit of a rebel at school ... There was no integration at school. It was from a trend that was completely exclusive. It was a white only school. There was no racial mixing at all ... as I say, I hated school. I didn't enjoy the enforced discipline, the rules and regulations and I found the structure of the school to be really terrible. So it really was a different time when I went to university –there was freedom of speech and stuff. But I really didn't enjoy school. When I left I was so happy. I saw it as my nightmare ... I was definitely doing well at school. I got the marks. Yea, the school was very traumatic. It was very tough. Maybe that's why I chose academia because I wanted the freedom. As you learn, here too, there are a couple of things you'll have to be careful about [Associate Professor Paul-Gibson].

Data reveal that at the very heart of this indifferent appraisal of the school as a social institution there is, simultaneously, a particular storyline that speaks to the discomfort whites may have with the tag of 'privilege' affixed indiscriminately onto them by virtue of group membership. There are various mechanisms employed to dilute this sense of white privilege in ordinary public imagination. These include, as data demonstrate below, an emphasis on the spatial location of one's schooling (for example, the respondents would tend to emphasise the rurality of their schooling), school social responsiveness (exemplified here by accounts of certain schools taking part in outreach projects that focused on neighbouring underprivileged black schools), the public and private school dichotomy (respondents emphasising their public school background and thus drawing implicit material distinction between the private and public school experience) and a reported non-adherence to apartheid syllabi which was based on the assumed inferiority and superiority of races e.g., Bantu Education and the white Christian Education syllabus. Asked to recount their schooling and its influence on their career choices later in life, respondents emphasised the unconventional spatiality of their schooling, as may be demonstrated by this quote below:

Well, mine is a bit difficult. I come from a country school near Schoenoord – quite a way outside the city, but you could travel if you wanted to. Because we lived there, my parents decided to take me to school there. So, from [an] English-speaking home, I went to an Afrikaans-speaking school, which was quite a transition ...I don't really think that my schooling made me what I am today. Well, my schooling wasn't the sort of the classic model A.B.C. schooling. We just went to school to learn ...and from there, I found that learning was what I wanted to do, but I wanted science and I wanted science

for mankind [applied science, not blue sky science]. It was inherent in me to do what I wanted to, it did not arise out of my schooling [Associate Professor Groenewald].

Thus, by its rurality, the respondent implies his schooling was ordinary, and that it may not have been as well-resourced as compared to most white schools in the main cities and towns at which majority of whites attained their schooling. Usually, rural locations in most parts of the world are the least resourced, and often tend to be last in the queue for development. In fact, it is through the sense of 'ordinariness' that the respondent's narrative seeks to shed off the burden of a privileged education. She downplays the school stratification in terms of models A, B, and C and then declares that there was nothing really special about her schooling for 'we just went to school to learn'.

A senior professor who is also a head of department made similar attempts to shed this burden of privilege by trumpeting his rural schooling roots. He did so, adding the virtues of hard work, personal responsibility – all the much vaunted ideals of crass liberalism that put a heavy weighting on the individual person as always an active, able, and willing agent, not beholden to structure (nor to circumstances):

I went to school in Pretoria. I had to milk cows in the morning before I went to school. It was a very interesting time but we did very little at school. How we passed matric, only God knows. We did not really study. We were extremely busy on the farm, so time for studying was consumed by the requirements on the farm and also out of attitude towards playing. Time for studying was on the back burner in those days [Professor Rosenthal].

The roles of gender and schooling were raised without prompting by the two women professors whom the researcher interviewed. Again, gender, much the same as spatial location, was also employed to demonstrate a sense of difference and disadvantage. The result is to dilute privilege on account of race. Early on during the conversation with this researcher, it became clear that white women had a natural inclination – and received comfort from this - to express their misgivings about gender disparity (and how this may have been inhibitive) from the level of the school onwards. They were less inclined to similarly comment on the extent to which their race had unfairly advantaged them. They did not consider the school a social institution that was the ideal locale at which girl children were groomed for postsecondary education. In fact, one of them indicated that schooling for white



girls may, after all, not be that privileging since post-school choices were few and far between:

It was a natural move that I go to Stellenbosch [University], if indeed I could go to university – you must remember that in our time, girls didn't really go to university. They got married and managed their home and children, especially anything to do with medicine – it was a no-no! [Associate Professor Groenewald].

The other associate professor added:

Well, as a girls' school, one of the advantages was that the gender issues I think sometimes they count against girls in a mixed school. I think as girls, we were allowed and expected to develop as young women, as adults, and not as women in a men's world. So I think there were those advantages [about my schooling] [Associate Professor McKinnon].

Having avoided the strictures of apartheid syllabi was also emphasised pointedly by white respondents in the presentation of the self as different to 'other' whites who routinely and fastidiously followed the drills of the racist, authoritarian, and sexist white Christian National Education syllabi. This eagerness to pose as being different from the rest of their white school cohorts sought to convey a particular message that, unlike the rest of the South African white population, their schooling curricula imbued in them an ethos, and a set of values, mores, attitudes and virtues starkly dissimilar from those of ordinary whites:

Well, it was called a government-aided school. So our curriculum was broad but I did not experience the Christian Education. That was not the curricula we followed. So when I went to university, I found that those that I joined there – the way they have been learning from school and the type of authoritarian cultures within our schools, I was quite shocked because that is not the way it was at school. I mean we had a student parliament back in the 70's which became to be a much common thing later. [But] there was no integration at that level ... I matriculated in 1976 and at that time, there were very firm lines about no race mixing at the school level [Associate Professor McKinnon].

Unmistakably, although whites in this study may be eschewing the tag of privilege, this did not extend to an overt disquiet about the quality of tuition they had received at the school. Indeed, on the technical front, the school as an institution did what it purported to do. It gave them the highest possible quality education that would carry them beyond the bounds of the school and open up new possibilities for life beyond it:

I didn't enjoy school very much ... I went to that school so that I get the science syllabus. It was a rural white school. It had the basic education that you would need. Schooling was not a very good experience as a pupil. It was very rigid. So I wouldn't say it was fulfilling. But it provided the basic education in helping one to get into the next step [Professor Maritz].

One of the female interviewees added:

A lot of people say your school days are the best time of your life. I don't think so. But, it doesn't mean to suggest that my schooling wasn't good. I think it was well rounded. We had a lot of opportunities, not only academic but sports, arts, culture and so on [Associate Professor McKinnon].

Outside of the school, the family, in all its variant manifestations, still remains an important institution through which cultural schema are acquired. Respondents looked far more favourably at the white family as a social institution than they did at the school. This is so even for those whose choice of medicine as a career may have been more from without (forced on them by the family), than from within (i.e. as a result of a conscious and informed choice of their own), as it is illustrated by one of the respondents below:

I got into medicine because I was encouraged by my parents. I did realise that it really wasn't for me, but you know, it's one of those things that we have to do what our parents tell us to do. And I did that. Well, it has been helpful because although I am a scientist, having started with medicine helped my career [in terms of the politics and the hierarchies in Faculty – he elaborates later]. But being a professor and researcher, that kind of stuff, it really was not something that I always wanted to do at the beginning [Associate Professor Paul-Gibson].

Supported by the expansive social networks at its command, the hegemonic role of the white family in the broader social context seems fairly self-evident. The respondents' familial core seems to have amassed the appropriate social capital that created a foothold making it possible to ascend to their current elite professional roles. Family social networks were considerably credited, and although medicine and academia may not have been running through the blood in some of the families, this would often be compensated for by the family's immersion into other elite professional occupations into which many blacks would historically have been denied access, such as engineering, accounting, land surveying, etc. Notwithstanding this, the choice or heritage of medicine for some came as a result of having observed, interacted with, and/or having been positively influenced by others in the family line (directly or indirectly). The following typified the white family's social processes of

nurturing which were, in the main, atypical for blacks, given the inefficacy of their family capital:

My father was a GP [General Practitioner] and my brother, my older brother, was a medical specialist. There were no academics in the family. So I'm the first generation academic [Professor Maritz].

All my family is into business. My dad always thought all academics were lazy and that they only worked during term time – and it was this idea that you teach only two times a class and that's it. He now realises how hard we work, even harder than business people. So I had no culture of medicine in the family. But for becoming a doctor, I had an uncle who was a surgeon and I used to go and watch him doing orthopaedics [Associate Professor Paul-Gibson].

So I didn't come from a line seven generations of doctors or something like that. My parents wanted me to do something that they thought would make me more fulfilled. So they didn't try to push me into their own professions. In fact, they both tried to discourage me from their professions to try and see if I would choose that or something different. So there was no sense that this is the heritage, and you must preserve it [Associate Professor McKinnon].

The almost symbiotic relationship between chosen career paths of the respondents and the role of the family (directly or indirectly) in the choices made, may come as no surprise to most who have some familiarity with South Africa's racialised past. More intriguing, however, were pointers in the data which suggested some form of discomfort with the presumed sense of privilege. Here, respondents went at length to shed off this white burden of privilege by invoking the idea of 'a first generation academic' as well attempting to 'genderise' their experience. The idea of a 'first generation academic' implies debunking preconceived notions that one is an entitled heir since there exists no heritage of academia from within the family. In other words, one comes into the field with no sense of 'at home':

I am the first doctor. The family is very small. There are not a lot of us in South Africa. Most of those who are here are into professions like teaching, dentistry, law, economics, commerce and so on, but I was the first medical doctor in the family [Professor Rosenthal].

While the respondents overleaf had a familial coterie of persons in professions including, of course, medicine and academia, she interestingly suggests that there had been no person that she could look up to and model herself on because those around her were not doing what she ultimately chose to do. While she mentions the role of gender disparity as a likely

impediment in the politics of the family in general, she concedes that for her specific familial situation, the role of gender was insignificant:

I come from a family where everyone is a professional of some sort, but they are all different. They are in law and medicine. My father was a land surveyor ... .People in the family got trained: they became specialists and professionals in their fields. So yes, there were quite a few scientists and a few doctors ... over the years, there have been people in the family who became academics, but this was not predominant. I mean I didn't have any role models, I have to say. I didn't have anybody out there who was doing something that I thought I also love to do. In fact, when I was growing up, there were no lecturers, there was nobody that was attached to a university, and predominantly, these [professionals and specialists in the family] were men ... [but], that, to me, was not a deterrent [Associate Professor Groenewald].

I do think my rooting in the family and my upbringing contributed a lot. They made me feel that I was able and capable of being the best that I can be. There was never a sense that you are just a girl and you can't be [Associate Professor McKinnon].

The heavy weighting given to family as opposed to schooling was evident in all five of the respondents. While white respondents seemed modest in their appraisal of their schooling experience (and the researcher has inferred that this may be due to the discomfort engendered by what is presumed to be the feelings of privilege that are a striking feature of white schooling), on the contrary, they became more animated when narrating and assessing the efficacy of their familial ties in steering them to certain career directions. It was quite evident that the five white respondents either had a history of medicine in the family and/or had close family members in other elite professional fields. However, as it was the case with school appraisal, here too were semblances of white discomfort with privilege, electing to employ pacifiers such as 'I am a first generation academic' to vain attempts to create an image of 'ordinariness' about themselves. That said, South Africa's racial social structure and the benefits that it accords to the different groups in society was quite evident, notwithstanding the opportunistic invocation of pacifiers to downplay white privilege.

### **7.3 Academic Interest Genesis**

The subsection explains in brief the journey of whites into academia, exploring in the process, the familial core that provided them with a wide range of career options. Were they accidental academics or was there necessarily a deliberate social process meant to steer them in particular directions, given the wide range of options at their disposal? If theirs was a

planned odyssey, does this adequately explain their deep sense of rootedness and belonging at UCT FHS? Notwithstanding their relative privileged schooling and family backgrounds, most white respondents reported that their gravitation towards an academic career was not first mooted through the family as they had not made clear-cut career choice early on, but rather only during the advanced stages of their tertiary education:

I didn't know what I wanted to do at school. I was however good at science and maths, and also in history and although I thought I would do something in the science area, I never really knew what it was going to be. When I got to university, I oscillated quite a bit. I did a degree in physics and mathematics and then decided to register for Honours degree in physics and I did stay with some uncertainty [Professor Maritz].

One of the respondents even reported that her identity as a scientist outweighed far more her academic identity:

My gravitation into academia was not planned at all. I thought I was going to be in a laboratory. I was going to do research, but I wanted to get people connection [wanting science that connects her with people – not blue sky]. As I see it, my wanting to do medicine was an indication that I wanted to work with people.... I never really was [keenly interested on the academic side of the work]. So academia, it just happened. I don't regard myself as an academic, I regard myself as a scientist [Associate Professor Groenewald].

Academic identity seemed stronger if one had developed an interest and actively pursued an academic track during the early stages of one's training. Role-modelling was also emphasised as an important contributor towards developing an interest in an academic career:

I was stimulated from the beginning to work on research and I went to Rhodesia as a medical student for two years before my final year at the medical school. I spent two years in Bulawayo. I thoroughly enjoyed medicine and I was so preoccupied by the surgical experience there that the university wrote that if I did not return within a week, they will make me repeat the whole year. It was nice in Bulawayo and I did not want to leave. As I took more time at the medical school, I found myself more curious in wanting to find solutions to problems and that's what landed me into an academic career [Professor Rosenthal].

Further:

I had icons at the university. There were people that were excellent in teaching, in clinical ability and as persons, we could follow them because they were icons to us and they indicated to us that by utilising certain principles, one can become an expert in a certain career and I think the icons at the university like Professor Swartz and Professor Louw were people who made us believe that it was worthwhile following a career that was very similar to theirs [Professor Rosenthal].

Given their seeming privileged familial and schooling backgrounds, it could have been presumed that for them the genesis of an interest in an academic career emanated from this very background. While, doubtless, respondents benefited from the special privileges accorded to them by family and by extension, the schools they attended, it is interesting that these two institutions i.e. the family and the school, did not play a role of any great significance in steering these white respondents into academic careers. Instead, evidence suggested that their gravitation towards an academic career followed logically, as they went further with postgraduate medical training. In other words, there never seemed to have been a well-intentioned and conscious process leading them into choosing academic careers. This point will become self-evident in the next subsection that interrogates the negotiation of entry by these respondents into the academic field.

#### **7.4 Finding Points of Entry**

There are several ways, outside of the orthodox, through which members of the academic staff found entry into the medical school. These includes coming in through contract activity (on soft money<sup>100</sup>) in a research unit. Insider contact and/or an invitation also is evident as a mechanism through which white faculty entered into the medical school (although these do not discount the traditional recruitment and selection procedures that still had to be adhered to). However, from the data gathered, there seemed no discernable pattern between the invitees and those that had gained entry into the UCT FHS through the orthodox route i.e. responding to job advertisements and having to go through the formal selection process, meeting the minimum requirements in terms of their publication profile and so on. In other words, irrespective of how they gained entry, all respondents in this group exhibited a greater sense of place than had been the case with most black registrars. Consider, for example, the following excerpts from three white academics that describe a sense of propriety and affinity with the institution, while at times acknowledging that this may not be uniform across the institution:

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<sup>100</sup> Soft money refers to funds usually used to pay contract researchers and academics. Such funds are known as 'soft' because they are from willing donor agencies and never part of the normal departmental operating budget.

To me it's been a good change because the culture of the actual campus has changed. To me, UCT has been very progressive. That's what I've seen from when I started...UCT has been a very good experience. It has been nurturing – growing with people together. So nothing has been a bad experience for me... I have seen nothing but positive growth [Associate Professor Groenewald].

They [blacks] must come on board. [If they don't] that's their own issue. That's nonsense. They must put [aside] that issue [of making racism claims] and come on board. The doors are open today [unlike during apartheid]. There is no way we can discriminate. We cannot discriminate and do not want to discriminate. In the past, we did discriminate a lot as you may be aware but that is in the past [Professor Rosenthal].

There is comfort, and you can fit in all sorts of ways. Obviously, the most comfortable is to fit into the dominant culture that pervades the institution. The dominant culture within the institution is sort of Western culture – Western higher education. There are lot of other people who are not comfortable with that. That's sort of a cultural clash [Professor Maritz].

This sense of ownership and affinity is a common thread running through this group, although (as will be shown elsewhere in the chapter) there were differences as to the extent of their belonging. The excerpt from Professor Maritz above has a similar ring of belonging and contentment as the other two except that here the respondent acknowledged that his opinion may not be universally felt as there are others, who, for historical reasons, find themselves displaced and not part of the institution. Unlike Professor Maritz, Professor Rosenthal in the first excerpt was indignantly dismissive of the unsavoury black experience, especially with the suggestion that it bordered on their race. His utterances are distinctly 'othering' in nature, while at the same time they attempt to paint a picture of a place at which 'doors are always open'. The excerpt by Associate Professor Groenewald is also interesting in that, unlike Professor Rosenthal, it appeared that she dismissed the black experience by turning inward, and making reference only to her own experience, and thus, indirectly, ignoring the 'other' experience.

### **7.5 Insider Whites and the White Periphery.**

Whites, as seen in this group's interviews, were in the main at home, and had a greater sense of rootedness to UCT in general and to the medical school in particular. Despite this, it was clear that there were some whites who (although they did not hover on the periphery their black academic colleagues) nevertheless still felt that they were outside of the core centre – that they were marginalised. Whiteness seems to crystallize, most notably, along political,

social, and religious lines while its guarantee of space in the centre is hardly ever in doubt. For example, in the case of the peripheral insider, below, notwithstanding his sense of disconnectedness, he still remained part of the centre:

The Faculty had been very hostile to us because we were seen as radicals and sympathetic to the plight of the working poor, and they were not keen on that [Professor Maritz].

He then further elaborated:

Well, there are some networks, for example, I am Jewish and the Jews were excluded from this type of institutions not so long ago. They went for public high schools, not hierarchical private schools like St Andrews or Bishops [exclusive private school in Cape Town]. There is a significant number of other people that might find it easier to relate to the institution, it might be through your work or other things. That creates the feeling that you are not isolated. If you need advice, you can phone up somebody and say this and that situation I don't know how to handle it, would you please give some advice. Also you can get some psychological support from them for all sorts of things [Professor Maritz].

The following excerpt from the same professor, however, demonstrates that social safety nets remain available to occupants of the peripheral white centre, to which, almost without exception, other marginal racial groups, like blacks, have no access. Also, while the senior professor may still feel marginalised, the level of support he received exemplified in many ways his position as a member of the dominant group, as somebody who is part of the centre. This is seen in his explanation of how his career metamorphosed from a peripheral research contract occupation to a substantive senior position in the university's academic hierarchy:

One day the dean phoned and said he wanted to see me. He sort of sat me down and asked: what are you doing, have you thought of this and that. That was very useful. He pointed out that there was a new speciality for me ... The department was very weak at the time. He said that if I was prepared to become specialised, there was a very good future for me in that department. He outlined a course of action for me which was very useful. He told me how I could become specialised and he said I must get a PhD. I had a whole data set which I obtained in 1985 in a study I had done in the region. I knew at the time that the study was worth exploring and that I could prepare a PhD study because something like that hadn't been done before [Professor Maritz].

The making of an academic, as exemplified in the journey of the senior professor, laid bare some of the contradictions of an academic career track that always purports to champion meritocracy and a strict adherence to minimum entry requirements (including academic



qualifications). While system gatekeepers create the ground rules, they are nonetheless able to sidestep them in preparing their preferred candidates to be fiercely competitive when vacancies do become available in the future.

Others, however, followed the 'natural' route. This meant that they first attained a specialist qualification and responded to a job advertisement with no known 'middlemen' on their side. They too had seen a meteoric rise in their academic careers. Predictably, the language of 'merit' and 'standards' resonated well with this group of whites, and in recounting his progression from the point of entry, one senior professor - also a head of department - enthused thus:

I followed the standard progression – there was nothing spectacular about it .... It was based on experience, academic achievement and research that had been done. So it was sort of a combination of factors ... The first years were heavily clinical, teaching was part of it. Research came late. It came in the 1980's when I started writing papers and contributing to chapters in books and so on [Associate Professor Mc Kinnon].

The white female associate professor, below, similarly gained entry through the 'natural' route without ever benefiting from willing insider operatives. Interestingly, her sense of belonging, contentment, and success seemed quite pronounced for an outsider. In this instance, therefore, the most plausible inference to make could be of the possible link between UCT FHS and her whiteness, and the assortment of entitlements that membership to a white group brings:

They said [students she was helping with practicals in the ward] there was an ad, and please apply. So I did. In fact, I had previously applied for a post at [a university in Johannesburg], so it wasn't as though this was my first thought of academia. I was always thinking that I would be interested in moving onto an academic position. I was fortunate that I was in the city [when this particular post was advertised] I had no idea what the medical school environment would be like. I had worked in a variety of settings but this was the closest I got to an academic institution. I came in as lecturer. There was assistant level post at the time, but I came in as lecturer. When a post of senior lecturer came, I applied and I got the job. After that, I put my name up for ad hominem promotion to associate professor. So, that's how I progressed. I have been here for 20 years [Associate Professor Groenewald].

White respondents almost always sought to diminish the role that networks may have played in easing their entry and subsequent career progression. However, despite the downplaying of

the significance of their social networks, evidence still showed that these have been important:

It all sort of came by luck. I was called by Professor Hutchison after I did my PhD. [The year following the PhD] they gave me a post doctoral fellowship for two years ... So, I started with on a normal route, and then a short term contract post which was with a research council, which I'm still doing because I am still a researcher and have a very small teaching load. I do a lot of research. Then I became associate professor in 2001. Before then, I was in the US for a year and half on a fellowship program in Washington DC. Then I came back to join half of Professor Du Plessis's lab and half of Professor Hutchison's lab. Professor Du Plessis was head of [speciality] and was keen to get me back to work with him [Associate Professor Paul-Gibson].

In fact, as part of his journey into the Faculty of Health Sciences, Associate Professor Paul-Gibson intimated that he was actively headhunted by two senior UCT FHS academic staff. So, he had the benefit of significant assistance through the networks he had established as a doctoral student and, later, as a postdoctoral student.

There was at least one case of a white academic with no prior knowledge of the internal workings of the medical school who was taken into the employ of the institution only on a temporary basis as a maternity leave replacement. While she clearly had had no benefit of existing social networks and willing middlemen from within the UCT FHS since making this initial entry, she was courted and supported by the institutional insiders. This has seen her progress through the ranks to the position of associate professor. Here too, she came in far less qualified<sup>101</sup> but was coached and given all the necessary assistance in research training and towards earning her doctoral degree. As a white candidate who has had no prior access to the medical schools internal networks, it is noteworthy that her initial 'outsiderness' seems to have had no bearing on the development of future social relations with colleagues at the medical school. Her greater sense of belonging is even more accentuated by her feeling of discomfort that the support given to her has been more than what she may have ordinarily been entitled to. Since merit and other virtues fail to account adequately for her contentment with the medical school, it then becomes too difficult to rule out the efficacy of her broader membership of the dominant white group. Thus, it is not too extravagant an inference to

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<sup>101</sup> While in the medical academic profession, the initial MB ChB degree is a minimum requirement, those who are in the allied professions need a minimum of a PhD to be seriously considered for first level entry teaching posts. The respondent falls within this category, as she is not a medical professional but rather a medical scientist, doing most of her work in the laboratory without any contact with patients.

make that, all things being equal, her whiteness accorded her certain entitlements, although she seems to have been oblivious to this herself:

It wasn't meant to be [presupposing that her appointment came by chance]. It was my first post and all I was looking for was a job at a university. I had enough of a university after three years of study. I was offered a job here as a relief lecturer. Somebody was on a sabbatical. They were looking for someone who would take up the position for six months. So I was just keen on doing something. I didn't have a clue as to what it was going to involve. I did know it was teaching. At night I had taught and I had tutored [also] and I enjoyed. They couldn't find anybody as a relief and they took me. From there, I went onto the science. I was on the bench [in the laboratory] for about 15 years. I [only] did my PhD when I was 40 years. So I worked first, and then got my research interest [publications] afterwards I came in very green and had a very naïve view that all I wanted to do was research [Associate Professor Groenewald].

The respondent above got her PhD only when she was already forty. The question is how a researcher can stay within the employ of the University for almost fifteen years without a PhD. This can only strengthen the earlier observation of the evident efficacy of white social networks, and the extent to which they have a hold on the institution. Here, even as the institution preaches the language of high academic rigour, 'standards', and 'merit', whites who have potential and show an interest in academia, while otherwise not yet fully satisfying the 'standards' – 'merit' barometer, will be accommodated and assisted along to get them to the required levels.

In summary, what has become apparent is that there exists, as part of the white experience at UCT FHS, the central insider positionality and the marginal core positionality. Central insider positionality depicts a white disposition that is characterised by a greater sense of affinity to the institution as is evidenced in the self-appointed role of always purporting to speak on behalf of and in the best interest of the institution. In contradistinction to the central insider positionality, the marginal core positionality involves subjects that feel, behave, and act as though they are outsiders while simultaneously remaining part of the core, i.e., a constitutive part of the core. This means that while they profess to be marginal, they are nonetheless on the margins of that very central territorial core, hence the use of the term peripheral centre. Put differently, while whites may claim a marginal status at UCT FHS, it was never to the same extent that blacks did (or could have), since whites, notwithstanding intermittent

feelings of marginality, remained part of the centre. Again, attesting to the staying power of whiteness and the salience of race and racism.

## **7.6 Social Interaction**

When discussing interaction, the white respondents framed it as either formal or informal. Most of the interaction they referred as formal included business discussions at meetings like staff departmental meetings, committee meetings and Faculty Board meetings. Informal interaction included impromptu talks in the corridors and the tea room and during occasional lunches or dinners outside of the Faculty's spatial milieu. In great contrast to the experiences of most black registrars - as recorded in the previous chapter - all white interviewees reported no personal accounts of forced social interaction in their departments with colleagues from different backgrounds. Their accounts paint a picture of cordial relations in their respective departments, emphasising even the extent of the informality of most of their interaction with colleagues, as one respondent made the example, 'we have a very less formal structure, all our seniors are on a first-name basis'. One respondent commented that 'we have a very unstructured way of doing things'. The 'unstructured' here presupposes not a structural deficiency just as 'first-name basis' does not convey a general lack of decorum or due deferment. Rather, the respondent sought to indicate that there exists in this sociality, civil and collegial social relationships unaffected by other axes of human difference, including race. The excerpt below captures, in general, the predominant view on social relations among colleagues, as seen by white academic members of staff:

We are quite friendly to each other. We do socialise when somebody is coming or they are going to do something big. Everyone is included and everyone would turn up. Sometimes we involve spouses or partners. I think we enjoy each other's company. [Associate Professor McKinnon]

Another colleague concurred:

So there is a structure but the structure is a very loose one and it encourages the young people to very early on take part in decision making processes. They know that they can challenge the head of department if they know that the decision taken is not the correct decision and they can look for alternatives – they are encouraged to do that. There are no penalties in the department. Here, free interaction is encouraged. [Associate Professor Groenewald]

The question of race rarely came up as a factor in social relations in all the interviews. Neither were relationships or social interaction among colleagues characterised or seen within the social constructions of black and white. Thus in whiteness, it seemed from the data that race was either invisible or non-existing.

The respondent below explains how it is possible that there is social interaction independent of such mediating mechanisms such as race, while emphasising the importance of internal networks:

I do collaborative work with other departments like psychiatry, psychology, statistics, and so on. So I am out of the department most of the time ... So there is a huge network around the university.  
[Associate Professor Paul-Gibson]

While the respondents in general described social interaction between colleagues as trouble-free, at least one white respondent came close to indirectly acknowledging race as a dominant factor in social relations. She employed a 'technicist' approach in rationalising why social interaction may sometimes be stymied - there are skills and aptitude required for one to traverse the UCT FHS terrain, as she explained, 'one must try and negotiate relationships'. The onus therefore is almost always on the individual person – it is their lack of the required skills and aptitudes to strike a chord with other colleagues around them that would continually make them outsiders. In other words, blacks may struggle to feel a sense of place because they lack the necessary tools to negotiate their way into the white world.

There were other factors that respondents flirted with as likely reasons why social interaction could, at times, be impaired. One was that the configuration of the actual office space and work space may hamper social contact. The other was a hint of issues as possible causes of social fissures in their departments, with gender relations the most prominently articulated:

With our division, we meet once per week for various things. Half of my division is on the other side of the building, so even when somebody is absent for weeks, I will have no clue. And that is the weakness of it. So we tend to meet in the meetings or in the corridors.

I think on this campus the male-female thing is still an issue, but it's never been blatant that I'm aware of. There has never been a time wherein I thought if only I were a man, I could have gained this much, but I've certainly heard some murmurings about it.

Race was forever absent in the conversation. There was only one respondent that voluntarily made reference to race in accounting for social interaction in his department. In making his point, however he seemed to have been suggesting that blacks have a better sense of 'at home' than coloured people. He implicitly equated the black 'at home' experience with that of white academic members of staff. In making a specific point as to whether black registrars in his department have a free-flow interaction with senior colleagues, mostly white, he suggested that:

[On human relations] I think it also depends on where you are. The registrars are sort of half and half [black and white]. Our last coloured registrar just disappeared and he was just about to qualify. We are very low on that side [coloured intake] and I think it is the university thing. There is a feeling that the University is not welcoming to coloured people. You would find here an increasing number of whites and African people [Professor Maritz].

Day-to-day social interaction is contingent on the availability of social networks within the academy. Typically, white academic members of staff come together on account of common interests. Gatekeepers around whom newcomers congregate are usually established researchers with formal academic authority as heads of department or of divisions and holders of research chairs. These closely-knit social networks meet both academic and social needs of members, as one respondent explained:

Personally, the most interaction will be Professor Du Plessis and his wife, who is also a professor. I did most of the work with them. I wrote a book together with Professor Du Plessis and Professor Pistorius [the latter is an internationally acclaimed researcher in his field and has been given an A rating]. We have a lot of coffee together. So I socialise a lot with Pieter and Sara [Professor Du Plessis and his wife]. I use Professor Du Plessis on a lot of things. I ask his opinion on most of my work...[Associate Professor Paul-Gibson].

Those with whom they are least likely to have social interaction are those outside of their academic interests. In other words, for white staff, the main glue that binds them together onto a social circle, as they see it, is compatible academic interests. They are, therefore, only most likely to confer with and defer to those within the same area of work as themselves, rather than those with dissimilar academic interests. As one respondent put it 'it would probably be people who aren't in my area of work [with whom I would least interact]. You

don't really interact with people outside the area of your work. I think it is where your interest lies [that moulds your friendships and acquaintanceships]’.

Longevity in the academic field also has its dividends when it comes to cultivating relationships as one respondent put it, ‘it also depends on time. I think you have to have worked with people for a very long time [to have a feel for them]’. Of course, it is on account of history that whites would have been at UCT and its medical school for much longer, and who have cultivated longer working relationships with their colleagues.

## **7.7 Culture, Traditions and Symbols**

### ***7.7.1 Prevalence of a Dominant White Culture***

There was an acknowledgement that the University's dominant cultural norms are mainly English and European. However, this is seen as unproblematic; a matter of ordinary commonsense. Nonetheless, when that burden of its Englishness and Eurocentric image is brought to bear, some deal with the discomfort by pretending or acting as though the image is absent, ‘you know you come in and say I'm just going to do my job. I'll forgo my emotional side’, quipped a senior white professor who is also a head of department. This was in response to a follow-up question that suggested that blacks at UCT FHS found the culture alienating.

While some whites acknowledge the existence of a dominant and permeable white culture within the institution, the increased intake of black students in the Faculty is not only seen as a mark of progress towards a desired and necessary social change, but also as a plausible opportunity for subaltern social groups to alter some of the excesses of the dominant English and Eurocentric culture, as a white female associate professor here explained:

We have richness in class. I have a class of 21 professionals and they are different and that means that you at least have 11 cultural norms in that class. What does that mean for the family, child health, childbirth, etc. – let's learn from each other. Let's learn of each other's phrases that we use for certain things. We must start to value that and not just English [Associate Professor McKinnon].

Another woman associate professor also concurred:

I see the difference in the profile of students and I find that to be very exciting and encouraging. To me it has been a huge change because the culture of the institution has certainly changed. To me, UCT has been very progressive. That's what I've seen since I started... I see the difference in the profile of students and I find that to be very exciting and encouraging. To me it has been a huge change because the culture of the institution has certainly changed [Associate Professor Groenewald].

There was some acknowledgement of the legacy of the grim past and the role that the University may have had in propagating segregationist apartheid policies, but at the same time, this was overshadowed by the respondents' recital of the university's innocent, unadulterated, glorious past. They saw the university as counter hegemonic space and thus an insulated locus (to apartheid racial ideology), as the following sentiments by two respondents below suggest:

You know back in the old days, the University was a different country from South Africa. It was a pleasant environment to be at while the rest of the country wasn't particularly a pleasant place to be. I think while it has been a challenge to be in South Africa, UCT had been a different place. I think it has been quite forward looking and moving on quite a number of important issues [Associate Professor Groenewald].

... UCT has always been open-minded, progressive. It's all-embracing rather than selective [discriminating, racist]. This is my perception [Associate Professor McKinnon].

### ***7.7.2 Defending Eurocentricism and Colonial Cultural Heritage***

White members of the academic staff in the interviews not only recognised the 'rich' colonial heritage of the institution. In reflecting on it, they framed it within the normal, unproblematic, universal and commonsense trajectory of many other universities across contexts, time, and space who may have been under some form of foreign occupation. Most posited a view of a university as an unproblematic space, a fixed given, and something whose being evolves organically, often unaffected by dominant social, economic, and political currents of its surrounding environment. The following argument by one senior professor, who was once a head of department, is most telling:

UCT is no different from other universities in the English speaking world ... universities are institutions that do not change so much irrespective of the particular historical and political period. That universities are colonial implants, there is no question. South Africa is one country that changed owing to the colonial influence. So we live in a country whose substantial being has been shaped by



colonialism. There is no question about it. Those influences, to a larger extent, are also universal. If you are to do certain things at a university and get far, you have to show that your work complies with established and accepted institutional trends or ways of doing things here ... But beyond that, it is much more universal. That's what the university is. To try to change some of those [established and accepted institutional trends, ways of doing things here] you might end up with another animal [Professor Maritz].

Following the line of argument above, a glaring paradox seems to be emerging. The point the researcher wishes to make is that the respondent, in articulating what the role of the university is, seemed to see no compelling grounds to criticise UCT FHS as a culturally alienating locus for some. As a universalist space, insulated from the rest of apartheid South Africa, the reference 'how things are done here' and the 'accepted and established institutional trends' are then articulated without a context. On the contrary, 'how things are done here' and 'the accepted and established institutional trends' which the respondent referred to, are undergird by particular socio-historical and political processes outside the immediate space of the University. Thus, 'accepted and established trends' or institutional norms have everything to do with the norms of the dominant white group, drawn from, in the first instance, colonialism, and then, apartheid. The universality within which European colonialism is constructed, as was the case with one of the senior white male professors, was confirmed by one of his other white colleagues - a female associate professor in the allied sciences:

We have certainly drawn a lot from colonialism. I think we have to accept its scientific language. It is on the same way that America will say they drew on Scotland and England before and they made an American university into something that is theirs. I think UCT is probably still functioning along those lines because certainly from a scientific point of view, the majority of the scientific world community is in the English world [Associate Professor McKinnon].

Some respondents however, seemed distressed by the insinuation that colonialism (in the context of the history of the University, and how it is constituted currently) was, in itself, problematic. For at least one respondent, the conversation about change, and then colonialism as problematic was framed in a Afro-pessimist discourse, with undertones of the 'the heart of darkness'<sup>102</sup>. In remonstrating against what he sees as often a baleful attack on colonial states,

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<sup>102</sup> *Heart of darkness* is the title of Joseph Conrad's classic novella that delved in to the 'darkest' Congo to give testimony to the black lives in the jungle. While the novel did expose the cruelty of the European imperialists and their subhuman treatment of the natives, it was nonetheless melodramatic in giving an account of black lives

which he charges had had noble intentions in respect of their colonies, a senior male professor, who is a head of department spiritedly protested:

Nobody can tell me otherwise – the colonial system gave us something. It gave us education. It gave us democracy, in some way. Look at our democracy is different to the one in Zimbabwe. Colonialism gave us infrastructure. One can build on this. You look at India, the British colonial powers gave India a railway system, education system and democracy. The Indians have taken care of these structures. Had it not been that, I think there will have been chaos. You have seen what happened in Africa, the moment democracy disappears, there is chaos, there is bloodshed, it is like a rollercoaster. If you want to make this an African university, don't break it down and make it the lowest common denominator, make it the highest common denominator. Look at Makerere [University], the situation is dreadful. There is nothing left... I don't think we can allow that here. We do liver resection; we can separate Siamese twins; we do operations at this hospital, the results of which rival most hospitals in Europe and Australia. How can you replace me by bringing somebody with no experience and just say continue, carry on the work! Is it possible? [Professor Rosenthal].

While it may be easy to dismiss the white male utterances as prejudicial, the quote illustrates the profound fear, often unspoken amongst whites, of the change in the political environment precipitated by the coming into power of a black government. It signals a reminder of the intensity of the 'heart of darkness' narrative ingrained in the psyche of many whites about Africa and black people in particular. Here, the white respondent's sense of ownership seethes as he tells of the whites' trusteeship over the black 'others', whose progression would have been forestalled had it not been for the nobility of the colonising whites. Below, however, he made an attempt at striking a conciliatory tone by seeming to acknowledge the value of the political change and South Africa's supposed exceptionalism its tone of exceptionalism to the rest of Africa (which has become a wasteland after whites involuntarily surrendered power). However, even when foregoing South Africa's exceptionalism, the master and servant colonial relations remain intact within an existing culture that is seen as natural, unproblematic, and universal:

South Africa is changing since 1994. It is a different country and thanks to the Lord there was no revolution here and that is the result of the compassion of Nelson Mandela. Had it not been that, this country was on the brink of civil war. Any regime change in Africa in Africa was associated with massacres and distraction. South Africa went on a different route and the result now is that South Africa is the heartbeat of Africa. It is a leading light [Professor Rosenthal].

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– with savagery the most of inferences one could draw from Conrad's literary exploits. Rosenthal also employs the same frame in his imagination of Africa, and what eventually South Africa could become.

Thus, for the senior professor above, changing ‘the way we do things here’ is not only about changing ‘established and accepted institutional trends’. Rather, it is more about the insatiable desires by those who want to make UCT an African university and therefore precipitously, and without much thought, wanting to change the old guard, which is almost exclusively white and male.

## **7.8 On Ceremony**

Symbols are important for they are communicative tools about the essence and the spirit of the institution as a socio-historical space. In other words, that which may not necessarily be expressed in day-to-day conversation, may, nonetheless, be conveyed in symbolic forms. For example, while it may never be stated expressly in ordinary dialogue that the host society at UCT places a high premium on past contributions of mainly Anglo-Saxon white males, this may, nonetheless, be expressed, for example, in the plethora of portraits hung on corridors across the University - and at the UCT FHS in particular – in official signage which may also symbolically construct a narrative and in the naming of buildings and spaces at the UCT FHS. Signage, painted portraits, and names of buildings and spaces tell a story about the history of the Medical School – these imageries paint a picture of how the present relates to the past. In this respect, white members of faculty expressed a strong desire for university antiquated traditions to remain intact:

I think the tradition for me is very important as an older person. I didn’t think history and traditions were that important when I was growing up. I used to be very naïve but I’ve changed as I grew older. As for me, knowing that there is history and tradition is very important and I think young people should acknowledge this. As you grow older, you realise that you tend to cling onto certain something. UCT FHS is one big family. It has so much heritage and such a rich history.... I am open to change but I am also comfortable with tradition. But many people who are older than I find that change threatening [Associate Professor Groenewald].

The only rationale presented for people to have discomfort with change is their age. The need to hold something dear ‘to cling onto something’ is another rationale given for why some establishmentarians may find change somewhat unpalatable.

Some white members of staff also fervently cautioned against renaming buildings and spaces at the medical school and across the university. Any mooted change of names almost always presupposed, in the white imagination, wholesale changes, ‘sweeping out’, ‘throw(ing)out’,

as it was seen to be too drastic and carried out precipitously than, perhaps, is required, as the two respondents below argued:

Just like renaming of buildings, I think you would always find opposition. I think it would be a mistake to make drastic changes too much. Why sweep out all the old and replace it with the new. Why don't you put new structures in place that would be amenable to new names [Associate Professor Groenewald].

When it comes to names, one has to be very careful and very specific because there is reason for naming. I think we must not forget that the pictures we see hanging on our walls add value and [represent] the pioneers that enabled other things to follow. I don't think we should just throw out those. But I think we do get trapped with plenty of male names ... .Also, we need to look at more creative ways of symbolism [Associate Professor McKinnon].

Interestingly, the same protectiveness was not extended to the graduation ceremony, whose age-old rituals and prescribed apparel came in for some criticism:

To walk into the hall which is about celebration and then you hear this tiny little organ playing – you know, I get so distressed. We have this wonderful School of Music that has African music, jazz and all that, and all that we can hear is this piece by Vivaldi, goodness! I don't believe that they could still do it, but they do. There is plenty about Africa that we can celebrate. We have such rich traditions in African music [Associate Professor McKinnon].

I don't think that some of the traditions like graduation gowns and the hats that we wear – I have done all that and felt so stupid. It feels so ridiculous, but the future graduands want that because they believe that that is what it means to be an academic [Associate Professor Paul-Gibson].

Although there is, as seen here, discontentment with the form, nature and ritual that make up the ceremony, white detractors of the ceremony also expressed a need to keep a modicum of what constitutes ceremony have become permanent markers – an embodiment of ceremony itself. In other words, abandoning these may unwittingly detract from what is valued about the ceremony by all, irrespective of the different socio-cultural backgrounds:

But the future students want that. They want to have the gowns because they believe that's what it means to be an academic. There is open talk about these traditions and whatever happens, that will be what people want. I don't know if you won't upset other people because if you change things completely, there is that backlash too. You may lose what people think is academic [Associate Professor Paul-Gibson].

## 7.9 Whites at Home (and not at Home?)

### 7.9.1 Insider White 'Othering'

Among this group of white academic staff, three of the five had not had the medical training culminating in the MB ChB degree. Rather, they were trained in other areas of medical science within the Faculty of Health Sciences. There was a feeling among this group of white academics that, on account of their non-clinical training, they played second fiddle to their colleagues in clinical occupations. They made pointed suggestions about a hierarchy based on what disciplines are presumed to have more prestige as opposed to those considered peripheral in the socio-academic hierarchy of the UCT FHS. Emanating from the interview data and general literature on allied medicine, the researcher suggests the following hierarchical diagrammatical representation:

**Figure IV: Discipline Differentiation and Hierarchy**

1. Clinical disciplines	surgery, internal medicine, paediatrics, obstetrics & gynaecology
2. Laboratory sciences	Medical biochemistry, chemical pathology, immunology, physiology
3. 'Allied' disciplines	
3.1 'Allied' & 'scientific'	Physiotherapy
3.2 'Allied' & 'non-scientific'	Occupational therapy, nursing, communication disorders

In the light of the hierarchy illustrated above, for some whites, the sense of displacement or being 'not at home', hinged on one's location in the social ordering matrix, where clinical academics (for example, surgeons and physicians) exude a greater proprietary claim to the University's space, and thus a deeply felt sense of rootedness and a feeling of being in control. The Faculty's name also hints at the authoritative power of clinical medicine for it was not so long ago that the Faculty's official designation was 'Faculty of Medicine'. It was then changed during the university-wide restructuring phase in the late 1990s when it was fittingly changed to an all-embracing Faculty of Health Sciences. The disciplinary power matrix is also confirmed in Ramphele<sup>103</sup> (2008:221):

<sup>103</sup> Dr Mamphela Ramphele was Vice-Chancellor of the University of Cape Town. This account appears in her latest work, in which she assesses South Africa's progress in many areas of national life in the post-apartheid period, including higher education.

the heads of medicine, surgery, paediatrics and obstetrics and gynaecology wielded enormous power. Once appointed, they were permanent heads till retirement...with little accountability.

Laboratory sciences, although seemingly paced at second fiddle to clinical medicine, fitted in the middle stratum while 'the rest' (allied) disciplines languished at the bottom. The level of resentment at this hierarchy was particularly acute among those who considered themselves relegated to second-class citizenship at the medical school. 'They said we are allied disciplines', one white female associate professor protested during an interview, 'allied to what'? Therefore, although they have a greater sense of affinity to the University and the medical school, relative to any of the black respondents, second-class white citizens, disadvantaged by their choice of discipline, felt they were relegated to what this researcher termed the 'peripheral centre'. This point was also made clearly by a female white associate professor as illustrated in her comments below:

Despite that [here she was referring to her unqualified support from senior colleagues], one feels that in a Faculty like this, there is a two-tier system between professions as medical and the rest. They call us professions allied to medicine – allied to what? [She asks rhetorically]. Medicine is allied to what! It is disgraceful! So there are those issues ... There is something in this Faculty that some people matter and some don't. Take for example; there is this Club<sup>104</sup> of medical alumnae. What about the rest in the Faculty who are not alumnae medical alumnae? Then they will say that medical means everybody [Associate Professor McKinnon].

Despite their relatively weakened social position in the Faculty's social matrix, there was, nonetheless, a sense that the working culture in the disciplines outside of mainstream clinical medicine was more palatable than that in the clinical disciplines:

Clinical departments operate more along the lines of a military establishment. People are simply assigned tasks [clinical tasks] and they must just simply perform those. They only have to provide a service. That's their main function and not so much the academic thing. That is probably hard and in that environment, the head of department or the professor, is the king ... I come from a science background [laboratory sciences] and yes there is a difference because medicine itself is such an

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<sup>104</sup> The club to which she refers (the Medical Alumnus Club) has its physical space within the main Faculty building. Historically, medical alumnus congregated here for social events. Although it is open to all who are either alumnae or in the teaching environment irrespective of their disciplinary homes, the name has remained the same, with the result that 'others' perceive it to be an exclusive province of the physicians and other medical alumnae, with the rest really just being tolerated.

involved profession, but also a very rigid profession. So the culture that is there is steeped into that kind of tradition. Medical profession per se is very rigid ... It is a professional environment but also very traditional [Professor Maritz]

### **7.9.2 Stronger White Social Capital(s) (and Weak Capitals?)**

Although it seemed that whites possessed richer social capitals than did blacks, such capitals do, in fact, vary in respect of their effect. White academics attached importance to social networks available to themselves prior to entry at UCT FHS. Some of these capitals resided from the type of schooling that one is associated with, while some of the social networks coalesced around religiosity. The role of schooling type and religiosity are elaborated in the following comments made by a senior male white professor, who had previously headed a department:

The person who gets around the university hierarchy and often it tends to be people from private schools – the sort of St Andrews-Bishops model. That is the feeling. I have never been part of that model and I don't really identify with it. I find it quite exclusive and have been amazed at how this whole segment has been able to survive in the whole change environment and transformation because they are still there [Professor Maritz].

## **7.10 Whiteness Accounting for Black Experience**

### **7.10.1 Naturalisation of Black Alienation**

One explanation advanced for black alienation was that premised on its supposed normalcy and not necessarily on structural factors employed intermittently to determine the life chances of blacks. Put differently, white academics tended to look at the social phenomenon of black alienation as something inevitable. It is only natural, they argue, that in any social setting there will be those groups that dominate and those that feel like they are playing a subservient role. A white male senior professor argued along similar lines in trying to make sense of black alienation:

I'm sure if you go to an American university, there would be one dominant culture – Anglo American type of culture but there are very different subcultures and there would be enough people who are more or less comfortable with the dominant culture [Professor Maritz].

His colleague, a white woman associate professor echoed similar sentiments about the naturalness of black alienation:

I guess you can always find in-groups and out-groups in a place like this one [referring to UCT FHS]  
[Associate Professor Groenewald].

In following the logic of the two respondents above, the political, economic, social and cultural forces in society operate in an independent stratosphere, unrelated to such markers of human difference, as for example, race. Thus, to reiterate the point, alienation is rationalised as socially inevitable, inherent in human communities, and over which human subjects themselves have less control and influence. Because hierarchies are purported to be inevitable, this reduces any sense of culpability of the dominant group for the social ills in question.

The naturalisation of black alienation also was rationalised in terms of perpetual tensions in the environment that lead to conflict. In other words, the fact that blacks were jostled and displaced was only natural given the political nature of the institution and it being a natural site of intense struggles and conflict. The adverse effects transcend race since white members of staff could, arguably, be affected adversely as well by the very conflict and struggles inherent in institutions such as UCT FHS:

I know that the university is not as far as it needs to be and I know that politics is always an issue and power is always an issue. So whether it is about how we relate, or the institution in how it relates to the provincial department of health or the national department of education, there are always strings being pulled [Associate Professor Groenewald].

### ***7.10.2 Whites in Denial of Race, and Racism***

Some respondents did not see themselves as racialised actors, as they claimed not to see race. This was often vividly expressed with exasperation and irritation as one woman associate professor here retorts:

I don't have glasses that tell me what colour the next person is. I never have. It's always been a non issue for me .... I have never had issues with anyone of any difference ...it irritates me! That's nonsense! ... I have never seen anyone going home frustrated and feeling short changed because of the colour of their skin. I have seen people not progressing naturally because there was no research funding etc [Associate Professor Groenewald].

She further declared unflinchingly that:



In all selection committees that I have been involved in, it [employment equity / affirmation action] is always raised and discussed. However, when it comes to making appointments, we always took the best person for the job. When everything is taken into account, I don't see this being detrimental, to the extent that people [black people] don't simply get jobs [Associate Professor Groenewald].

Others sought to blame black discontent on blacks themselves while denying that race has consequences for blacks. In other words, it was the fault of blacks that they felt a sense of displacement in these English white milieus:

They must come on board. That's their issue, that's nonsense! They must put that behind and come on board. The doors are open today. There is no way we can discriminate and we don't want to discriminate. In the past, we did discriminate a lot as you are aware, but that is in the past, and if we want to make a success of this country, we should not dwell too much in the past. We have to move on [Professor Rosenthal].

In minimising the black experience with racism at the institution, some whites typically articulate any complaints as mere harping or even simply an inability to 'move on'. 'Moving on' here means stripping one's current experience of its social and political context – that is, beginning on a clean slate as though of a people without a past. There is no acknowledgement of a white sense of place as part of socio-historical processes that deliberately excluded blacks. This, in essence, diminishes the white dominant group's culpability in respect of black alienation at the institution. That is, blacks feel alienated because they don't want to 'move on'; they prefer gloating about their victim status: they lack agency.

### **7.10.3 Blackness, Meritocracy, and the 'Culture of Excellence'**

Meritocracy and excellence tended to be floated as scientific constructions, given, neutral, fixed, ideology-free, apolitical and unproblematic. They were presented as buffers whenever questions were raised about the absence of blackness at the medical school. Predictably therefore, 'excellence', 'high standards', and 'merit', as exemplified in the cliché 'the best person for the job', were all amplified, again with a sense of irritation (and at times, revulsion) at the thought that the life chances of blacks are adversely affected, on account of their race:

I have no regrets about the status quo. I don't believe that you should force the status quo to change. I think it should be through a process of natural achievement and the people are coming through ... What

we use is experience. I can't say to anyone who has never done surgery to do operation or go and teach students because they have little experience... . If we don't keep the standards nobody will come here for training and this will be detrimental to the university, the provincial department [of health]. We cannot allow that. That is not what we want in South Africa now [Professor Rosenthal].

He then added:

The university has to have high standards and the higher the standards this university sets, the better the end results. I have seen what happened to the university in Nairobi – Jomo Kenyatta. It is because all the people left and they did not have people to appoint and the standards came down tremendously.

On the other hand, whiteness tended to be conflated with notions of excellence, quality, higher standards. This explains why, for example, it has been largely whites who had gained entry into the ranks of faculty than had blacks. In cases where blacks were appointed, any resultant failures are easily attributable to their lack of merit. In other words, although there may well be other factors that could account for a lack of success by blacks at the institution, some whites tended to make a quick causal link between this lack of success and their race membership, for example, that black persons are perpetually the least-qualified and experienced:

So, you'd still get more experienced and qualified persons being appointed and those tend to be white candidates. With less experience, black candidates tend to be disqualified. Of course there are tremendous pressures on this to change. On the other hand, people have in the past been thrown in situations where it wasn't appropriate for the occasion and for them, and in the main, failures occurred [Professor Maritz].

Elsewhere though, the white senior professor acknowledged that because of their group membership, blacks tended to be kept on the margins, with 'white fears' regarding change understood to be the reason for black feeling of displacement. Thus, because whites see black entry into the institution in a zero-sum context (in that it is seen to want to diminish growth and professional development opportunities otherwise meant for whites) there is, therefore, reason to obfuscate, if not to be plainly unwelcoming:

Blacks are not readily accepted. They have difficulties in being accepted. It's got to do with the fact that they are a substantial minority. Until comfort zones are created, there will be a struggle and the reasons are obvious. Inasmuch as transformation holds possibilities for blacks and women, it also holds

a threat to people like myself, who are incumbents in their positions. So there is tension [Professor Maritz].

The point about white fears that stands on contra-distinction to the necessary and desired change is expounded further by the woman associate professor below:

I think there are times when openness with the people that are going to be affected by change does not happen sufficiently. So there suspicions are made about things. And it hurts the other people and that is not okay [Associate Professor McKinnon].

Interestingly, there was a single account where according to the respondent, merit notwithstanding, , they managed to reverse the acutely skewed racial demographics of the department [non-clinical tier-three department] as the woman associate professor recounted, touting the intrinsic value of a diversified teaching fraternity and class:

We managed in the department to make a big push that in one year, we made four posts available and of those four appointments made none were white. That changed the complexion of the department which was, until then, 100% white. That is terribly important because learners can see people that they can easily identify with, not just from a professional point of view, but to say that here is somebody whose life experience may be the same as me, and if they got there, I too could. [Associate Professor Groenewald].

While social constructs such as ‘merit’, ‘higher standards’, and ‘excellence’ are loaded and carry particular assumptions and meanings about blacks in relation to whites, in the context of the UCT FHS environment, whites were in concert that the institution has been doing its best as a progressive place but this pace needed to be a steady organic process as opposed to something that is, at great speed, shoved down their throats:

I think if you were to force change overnight, you would find that people [white people] don’t know how to deal with it and that can be more detrimental, in my opinion. It [change] is a gradual and a progressive one from where I have seen. It is a good one and we are moving on the right direction. That’s my perception [Associate Professor Groenewald].

She then added:

I think UCT has tried very hard [to get blacks into positions]. The people are just not there, that's the reality. I know where I am we try very hard to get blacks to the point where they are competitive for academic positions, although we try and get the best person for the position. I must say that in all the cases that I have been involved in, we have been very fair [Associate Professor Groenewald].

## **7.11 Culture, Tradition of Excellence**

The university is very well known. If you want to work in the world, you have to study and work at a place that is known, and that is what attracted me to UCT. I think it has tried for a long time to foster this culture of excellence, and of course if you do not go for excellence as a university, then you are wasting your time [Associate Professor Paul-Gibson].

The discourse of excellence at UCT on the surface is framed in neutral terms, and since the pursuit of truth, expansion and seeking of new knowledge is the foremost preoccupation of any institution of higher learning, it would seem obscene to trifle with 'that which works'. In this instance, there is no recognition that 'knowledge was and still largely is, white knowledge' (Jansen, 2009:20). Here, there is no recognition of the attendant power dynamic in knowledge production and ultimately what gets counted into the 'excellence basket' and whose knowledge is discounted. Excellence in the context of an institution of higher learning in South Africa which has been historically white is, in the main, a loaded political construct. It imbues a language of inclusion and exclusion, hence in the early phases of the country's political transition, excellence became entwined with equity (Ramphela, 1998). One needs also to understand the socio-historical context and the University's current positioning among its local contemporaries and global competitors. The University has been one of the best endowed institutions relative to its closest other local competitors. It remains the only university in Africa to be ranked in the world's best 200 universities (UCT, *Monday Paper*, 2007: 1) – 'it scored particularly well in the recruiter reviews and its intake of international students, as well as citations', and it is home to at least a third of South Africa's A-rated scientists on the National Research Foundation listings (Ramphela, 2009). All these embellishments provide grounds for self-congratulatory appraisals that reinforce the institution as a place of academic excellence.

### ***7.11.1 Excellence Mantra as Part of the Culture vis-à-vis Corresponding 'Heart of Darkness'***

Flowing from the excellence discourse (as framed largely by the white insiders) UCT is therefore seen as Africa's premier university and an undisputed standard bearer. Since knowledge and its producers have usually been white in colour (Jansen, 2009), and it is the very white knowledge and its white producers that have catapulted the university to the enviable elevated position it is in currently, black appointments are therefore seen and perceived to be antithetical to the merit discourse. This logic of thought is aptly foregrounded by one white senior professor who is also a head of department in the clinical disciplines:

The one that is important for the university is the standard of education. The research that the university is doing it is crucial part .... The university has to maintain the leading position of the university. Scientific research on the African continent has dramatically decreased. Scientists have disappeared. The infrastructure is not adequate. The support that people get to do research has shrunk tremendously... People that they appoint into positions must be the best persons qualified for that position or else, the Makerere University which was absolutely fantastic [we must avoid become Makerere]. It was a wonderful university but then Idi Amin started eating all the lecturers and killing them and driving them out. I don't think this university can afford that... The university has to have high standards and the higher the standards this university sets, the better the end results. I have seen what happened to the university in Nairobi – Jomo Kenyatta. It is because all the people have left and they did not have people to appoint and the standards have come down tremendously [Professor Rosenthal].

In further expounding on 'the heart of darkness' narrative, about which he implicitly counsels that UCT needs to be on high alert, he continued (and this is a point also referred to earlier in this subsection):

South Africa is changing since 1994. It is a different country and thanks to the Lord there was no revolution here and that is the result of the compassion of Nelson Mandela. Had it not been that, this country was on the brink of civil war. Any regime change in Africa in Africa was associated with massacres and distraction. South Africa went on a different route and the result now is that South Africa is the heartbeat of Africa. It is a leading light [Professor Rosenthal].

### **7.12 Accounting for the White Experience at UCT FHS**

Four of the five white respondents reported that they have had a good experience at the University. They exuded confidence, pride, and happiness in their association with UCT. The good experience was mainly attributable to the role of the self in advancing one's own goals,

as well as the role of mentors in supporting them, particularly in the formative stages of their academic careers.

### **7.13 The Academic Environment and White Agency**

There were strong views expressed about self effort. Although assisted by experienced mentors in the early stages of their academic careers, they vigorously pursued their own career development and had succeeded because of their own agency within UCT FHS:

You have to have the passion inside you. I am very passionate about my science, about understanding how things work. In medicine, as you know, it would be how life happens. How do we think and feel... The key is that you have to have an internal enjoyment [for what you do]. You have to have self drive....You also have to be bossy sometimes. You have to be able to say, this is my goal, I am finishing this first. You have to be able to say, I don't care, I am going to devote four hours working on this daily, and I won't be distracted by anybody [Associate Professor Paul-Gibson].

Such agency, as others have counselled, is particularly most effective if the subject recognises authority to which he/she has to routinely defer. This is one of the unwritten rules which, if observed, one's career (all else being equal) can see a meteoric rise, as one white female associate professor explained:

The willingness to learn on my part and the willingness to submit played a role. One has to be prepared to submit to somebody's authority. I have to recognise that there are people here senior to me. They have the experience and that is necessary [Associate Professor Groenewald].

There was only one respondent who, although registering a high degree of contentment with UCT FHS, similar to the others, experienced the misfortune of not getting full tenure, even as he moved through the academic ranks on ad hominem promotions. This was despite strong support from his head of department and invaluable social networks at his disposal, as he explained:

There have been times when I found the environment to be very stressful. We have had a couple of [acrimonious] situations and that's probably hard for a head of department who wants you but is not able to find a place for you. I have had a very good 12 years here but the last two have been particularly very painful. Funny enough, last year I have been battling. The thing is there has not been a post available. There have been a couple of difficulties which have obviously been heavy for me [Associate Professor Paul-Gibson].

White agency was also exemplified in the effort by whites to strike the delicate balance between cultivating and maintaining collegiality on the one hand while, on the other, struggling to grope more inwards; that is, staying focused to one's needs and one's cause, as a white male associate professor matter-of-factly counselled: 'You have to be collegial and also have time to do your own creative stuff'.

#### **7.14 The Role of Mentors**

All the five white respondents interviewed attributed their success at UCT and their sense of place to 'very good people' or mentors that they had worked with and, in some cases, continue to do so. Interestingly, for most of the respondents, such mentorship contact extended beyond the realm of academia. That is, mentorship bonds also became, simultaneously, reliable and exchangeable social networks through which other kinds of assistance was possible. Mentoring relationships are left to the realm of providence, or chance, or sheer luck since much depends whether or not there exists chemistry between the two parties – the feeling is that the mentor has to want to work with one if the relationship is to be successful:

I think I was very lucky too that I worked with very good people. In a close sense, I have a very good relationship with my mentor Professor Du Plessis. He has been here and has made it himself. He is successful. So I inherited some of that success from him. Professor Beatty is also a very successful head of department... You also have to be lucky. You have to work with people who also want to work with you [Associate Professor Paul-Gibson].

The status of the willing mentor in the academic hierarchy also plays a role and determines the efficacy (or currency) of such a mentorship relationship on the mentee themselves. In the case of one senior white male professor, he was taken in by the then dean of the Faculty of Medicine, the highest authority in that Faculty. The felt sense of security that one has been vetted by such authority should, on its own, give one a sense of comfort in what he also considers a 'generally hostile environment':

It is just that I was working in an area that I was so interested in, intellectually and socially ... as I said, the dean was very helpful. If it wasn't for him, I really don't know what would have happened. So clearly, he had the same social sympathies that I had. He had the impartiality to recognise that there was somebody who could contribute to the Faculty and to the system as a whole. You see, one was not experiencing that [support] as student because one was looking at the university from the outside and

not knowing what really goes on. You see it as a hostile environment. It is not a very friendly system. The university is that way generally. So you need some mentor and a closest guide and for me, the dean was that particular person [Professor Maritz].

To the white respondents, the availability of a willing mentor was both a necessary and sufficient condition for success at UCT, and all had, at point of entry, found such resources. For white respondents, the idea that one needed to have a mentor was almost commonsensical – it went without saying:

For me personally, it was an environment that was nurturing. And it was promoting people to grow. I do have to say that yes, I had a passion but I also had a supervisor who was my head of department. He was prepared to take me everywhere... An important contributing factor was the opportunity to work independently and be supported in that. My first professor who retired in 2000 was an excellent professor. She was stricter and she was good in the details. She demanded very high standards and she gave praise where it was due, and that was important because that sort of a person can make or break your career [Associate Professor Paul-Gibson].

Interestingly, one respondent flagged the feeling of ‘not deserving’ and ‘not having faith in oneself’ – the idea that one started off with the feeling of being an outsider. Such feeling can be attributable to the seeming act of grave deference to UCT as a ‘formidable’ institution rather than the feeling that her whiteness group membership disadvantages her. The role of the mentors here was to instil the lacking sense of belonging through collegial affirmation:

He will give you something that you’ll work on. His faith in me made me grow because personally, I didn’t have any faith about myself. I didn’t think I was deserving [sic] to be here, but he had faith in me. I had a good mentor. And [when] somebody who has faith in you, that gives you faith on yourself. I came to university as a mature student at 36, but because he said you can do it and these are these are the opportunities, he didn’t pull me down [I made it]. He gave me the opportunities and I took them. He was always there for me [Associate Professor Groenewald].

### **7.15 Summative Conclusion**

This chapter demonstrated that whites have stronger and fit-for-purpose social capital, attained initially through the family and the school and also edified by other social networks that the respondents access and maintain in the course of their professional lives. By ‘fit-for-purpose’ is meant that the capital they possess can be marshalled into assisting them to map a future for themselves and attain success. As demonstrated, however, whites tended to



downplay the efficacy of their familial and schooling background in terms of their current success, and instead trumpeted hard work, dedication, and individual effort.

Throughout the chapter, the white sense of belonging and affinity to the institution was unambiguously evident. This was revealed by their accounts across the many areas of life and work at the institution. For instance, it is clear that whites felt very supported; that they were comfortable with the dominant institutional culture (along with its traditions, its symbols, and language); and that social relations are more than cordial, thus suitable for nurturing and growth. Institutional support cannot be overemphasised enough. All the five white academics (without exception) enjoyed the benefit of a willing and able mentor from about the time their academic careers took off. Hence, while also drumming up individual effort, they attributed much of their success to these mentors. It needs to be emphasised that a mentorship role is not a formal role that which is expected and imposed upon the senior academics. Rather, it represents a kind of relationship that is organic – much depended on personal chemistries between the mentor and the mentee.

The chapter also shed light on the white indifference to black alienation, and at worst, a denial of this, especially at the suggestion that their race accounted for their alienation at the institution. As opposed to their race, whites rationalised black alienation in terms of the absence or lack of agency, with inferences made that blacks may, perhaps, be too comfortable with their victim status. The chapter also threw some light on the often unspoken phenomenon of the white peripheral centre, wherein a section of the white population might also feel somewhat alienated from the institution on account of other grounds such as religion school-type, discipline, and at times, gender. However, this researcher argued that, in the final analysis, although some whites may feel alienated from the institution, this did not totally remove them from the centre, for they remained in the centre, therefore, that this experience of a white peripheral centre in fact pays testament to the staying power of whiteness – in line with one of the basic tenets of CRT that holds that in race-centred societies, the spectre of race does continue to circumscribe social experience.

## **CHAPTER EIGHT**

### **Discussion**

#### **8.1 Introduction**

In discussing the research findings, the chapter first sets out what it frames as the harrowing condition of blackness in the context of post-apartheid South Africa in a bid to situate the lived experience of the black registrars' at the UCT FHS. In the first narrative, race is seen as being everything and everywhere, and thus, has an imposing presence in the shaping of the lives of the registrars. In employing CRT, this researcher looked towards socio-historical factors in an attempt to explain the genesis and sustenance of this vexing black condition, which, in all accounts, seem incongruous to the ideals of a post-apartheid era South Africa.

This chapter will argue that at the very heart of the harrowing condition of blackness is the logic of white supremacy at the UCT FHS, itself drawing sustenance from the racial social structure of the broader South African society. The chapter also explains the harrowing black condition in terms of the black registrars' positionality of 'a-typicality'. That is, having been catapulted into the relatively higher echelons in the social stratum by virtue of their professional roles in the white milieus, this poses a challenge to the dominant white ideological frame, that cast black and white relations in master and servant terms.

Black resilience is captured in the Second Narrative, with particular reference to black resistance to oppression. Implicit in this is that historically, blacks as an oppressed people, have refused to remain passive victims of white oppression. That is, they have clung on to the conviction that black progress is not, and should never be, contingent on what whites say or do. While resistance is an overarching theme for Narrative Two registrars, there was also a trickle of black colour-blindness which is further explored. This is juxtaposed (from the white interviewee data) against the white blindness to race and the propensity of whiteness to cast itself as invisible. Throughout these analyses cross comparison of relevant previous studies is made. The chapter then concludes by considering theoretical implications in respect of CRT vis-à-vis the 'particularities' of South Africa's socio-historiography.

#### **8.2 The Harrowing Black Condition in Post-Apartheid South Africa Rooted in Narratives One and Two)**

While in the new constitutional democracy in South Africa, overt forms of discrimination and open hostility by whites towards blacks have become uncommon, what one part of this research illustrates is the infrequent return to the crude apartheid-style social relations in the academy. This harrowing black condition in the academy needs to be understood within this schema of social relations that places whites at the pinnacle and blacks at the bottom. Hence, therefore, the centrality of race and racism, as one of the foremost tenets of CRT, is most appropriate in illuminating the black condition.

The centrality of race and racism is, however, premised on the compelling socio-historical factors. In other words, while there is emphasis on race and racism and key markers of black registrar experience, this need not imply that harrowing conditions elsewhere in respect of registrar programs also could be explained in terms of race and racism. By and large, international literature on registrar programs (Cohen and Patten, 2005; Girad et al., 2006; Yaman and Mehmet, 2002; and Bonifati et al., 2003) showed the totality of registrar experience that was negative. At the very heart of the problem is what the registrars perceive as insufficient training, intimidation and harassment. However, while these vices were commonplace in registrar programs, it is suggested that significant stressors tended to recede as registrars advance into their senior years of training (Cohen and Patten, 2005). In this respect, as majority of the registrars in the First Narrative were in their junior years, one may infer that, perhaps, their junior status may be part of the added burden. However, even if that were to be the case, it will not in any significant way, negate the spectre of race and racism as the primary factor shaping their experience and thus their sense of place at UCT FHS.

It is prudent to restate that at the very heart of CRT as an overall theoretical framework, is the idea of social constructionism, which, when extended, implores social theorists to bring the appropriate social and historical context to bear, as part of meaning-making. In other words, South Africa, like other race-centred societies, has a people that are products of socio-historical processes, of which racism (the idea that there are inherently superior and inferior races) was the central organising schema. In this respect, Charles Lawrence III argued thus:

CRT challenges a-historicism and insists on a contextual [and] historical analysis...[It contends that] current inequalities and social practices are linked to earlier periods in which the intent and cultural meaning of such practices were clear. More important, as critical race theorists, we adopt a stance that presumes that racism has contributed

to all contemporary manifestations of group advantage and disadvantage along racial lines...history calls for this presumption ... (1993:6).

What Lawrence (1993) sought to argue is delineated in Delgado (2005:12) wherein he insists that in social analysis, context and point of view matter. That is, current experiences are only better understood when juxtaposed against specific socio-historical processes. It therefore follows that if these socio-historical processes are brought to bear, the centrality of race and racism to the subjective experience of registrars will be abundantly manifest (as the data has demonstrated in respect of the first and second narratives). The apparent lack of support, accounts of intimidation (victimisation), harassment, shoddy training opportunities, among others, are interpreted by these black registrars as malevolent exercise of white power. It is within this socio-historical context that the black registrar experience needs to be understood. The point that 'abuse and discrimination may negatively affect the ability of physicians-in-training to learn', which, in itself is indicative of an openly hostile training environment is demonstrated by Cook et al. (1996:1658) in their study that assessed the prevalence of psychological abuse, physical assault and discrimination during registrar training.

Thus, current unequal black and white power relations, at which blacks are in servitude and enduring the wrath of whiteness, have an inextricable link to South Africa's overtly racist socio-historical past, which, unfortunately, has continued to linger, as the data from both narratives demonstrated (first narrative on the black registrars and also largely in respect of registrars in the second narrative). The Report of the Ministerial Committee on Transformation and Social Cohesion and the Elimination of Discrimination in Public Higher Education Institutions (2008) [otherwise dubbed, the 'Soudien Report'], although sparked off initially by the Reitz affair<sup>105</sup> at the predominantly white and Afrikaans University of the Free State, in its conclusion, affirmed assertions of many other previous studies (De Wet and Erasmus, 2004; Steyn and Van Zyl, 2000; Thaver, 2005; Brier and Wildschutte, 2006) that subtle forms of racism in the South African academy. In-house self-assessments (UCT Climate Survey, 2003 and UCT Climate Survey, 2007) are also consistent with findings of the above macro level studies on 'institutional climate'. In addition, both UCT FHS and the University of the Witwatersrand Faculty of Health Science had their own internal 'truth and

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<sup>105</sup> This involves the filming in 2008, by four white Afrikaner male students at the University of the Free State Reitz residence, of five coerced black cleaning staff, with hands on their knees eating food sprinkled with urine and some other kinds of bodily excretions. In the video, the white students also deride university's racial integration policy, particularly in the student residence system.

reconciliation' processes, which lay bare their complicit role in colluding with the successive apartheid governments. The truth and reconciliation measures, albeit symbolically, were meant to acknowledge past wrongs committed by these medical schools and an institutional commitment to correct these through the process of transformation.

It must be distressing that in the first black registrar narrative, their subjective experiences at UCT FHS sketched a classical master and servant social structure in which blacks see themselves relegated to the periphery. Some of the responses even intimated self-deprecation, suppressed aggression and non assertiveness, as observed in Poussaint's (1973) in his account of black America post-slavery and Jim Crow.

The First Narrative on registrars illustrated an environment of an almost open hostility towards blacks – a phenomenon antithetical to ideals of a post-apartheid dispensation. While current literature post-civil rights era (Bonilla-Silva, 2001; Bonilla-Silva and Embrick, 2001; Solomon et al., 2005), and in the context of post-apartheid South Africa (Durrheim and Dixon, 2000; Steyn, 2001; Ndebele, 2000 and Macdonald, 2006), all contend that white racism has metamorphosed from more overt manifestations to rather subtler forms of expression (and commission), the First Narrative illustrated some elements of overt forms of discrimination. And so, the question is: How could a master and servant narrative, so reminiscent of the spirit of the past, be such an integral part of the black registrars' social reality at the University of Cape Town Medical School, even as the country speaks of a post-apartheid society and democratic constitutionalism that guarantees fundamental human rights.

In respect of the above, a further qualification is needed and this involves the analysis of the mechanisms through which power is distributed in a multi-party constitutional state. In a democratic dispensation (unlike in a dictatorship where the ruling politburo has its tentacles spread across all strands of national life), power is defused and vested in various pockets of society, be they higher education, commerce and industry, the judiciary, the media, legislature, executive authority (cabinet), faith groups, ratepayers associations, professional associations etc. That is, while blacks could be seen to have political power, their oppression nonetheless has to be understood in terms of this power matrix wherein most of actors in power strangleholds are white and in such terrains as in organised business, higher education, the press and so on. In such a social context where whiteness is predominant and possesses power, white oppression over blacks cannot be a misnomer.

### ***8.2.1 The Logic of White Supremacy in the Academy***

As mentioned in Chapter 5, academic establishmentarian and a one-time scholar of note at the University of Cape Town medical school, Jannie Louw, posited the centrality of Europe (and by extension, whiteness) in his preface in the book chronicling the history of the UCT FHS. In his treatise, the native land is portrayed as one mass jungle, untouched by civilisation, until, of course, after that watershed moment when the first white European settlers set forth to settle in the Cape of Good Hope. Paediatric surgery professor JH Louw (1996) in his historical account lays bare the white attitudes about the ‘othered’ natives and the sweeping sense of white racial superiority:

When the first settlers arrived more than three centuries ago, South Africa was a wild and dangerous no-man’s land, where the lion roamed in unchallenged majesty. The human race had only a precious foothold. Barbaric yellow-skinned pygmies (Bushmen) from the desert upland country in the north-west hunted wild beasts with their bows and arrows, and brown-skinned nomads (Hottentots) of the southern coastal belt wandered about with herds of long-horned cattle...(xvi)

In making a case for the establishment of the first medical school in South Africa, which was to be the University of Cape Town medical school, Dr Bernard Fuller, chief medical officer of the City of Cape Town and also a member of the University of Cape Town Council (after whom the University’s main medical school campus building is named) made his point abundantly clear as for whom the proposed new medical school was to be built. By making reference only to whites as beneficiaries of the new institution, he implicitly, therefore, harboured no other intention other than to exclude those ‘others’ not white. Accordingly, Fuller (1903 cited in Louw, 1969:58) intimated as follows when addressing the sixth congress of the newly formed South African Medical Association:

The white population of South Africa is now over a million, and is bound to increase steadily and one medical school to a million white inhabitants is as nearly as may be the proportion which obtains in Australia and Canada, and in the United States itself.

On the grander scale, it is to be understood that it was segregation (acts of exclusion and inclusion) that propped up white supremacy. That is, segregation did not necessarily give rise to white supremacy. US based political scientist Michael Macdonald traces the logic of white

supremacy in South Africa to its seeming inextricable relationship with apartheid segregation. In his treatise, he argued that apartheid segregation edified white supremacy, while, of course, not fully accounting for it because white supremacy necessarily preceded apartheid. Thus Macdonald (2006) held that to keep the blacks out of the largesse only deserved by whites, racial segregation was necessary so as to give meaning and content to the ideology of white supremacy. This white mainstream thought found resonance in all enclaves of white society, not least, in the academy, as explicated in the social attitudes on display from Drs Fuller and Louw – two of the better known benefactors of the UCT FHS.

### 8.2.2 ‘A-typicality’ of the Black Registrars in the White Gaze

In one of the most comprehensive empirical accounts of the mutating nature of South African whiteness, critical white studies academic Melissa Steyn (2001) posits six narratives<sup>106</sup> which she forcefully argues represent a new dynamic in the white racial thought and identity negotiation in post-apartheid South Africa. Of the most relevant in decoding the ‘a-typicality’ effect of black registrars is the colonial fundamentalist (or denialist position) which casts blackness in pejorative terms, as is generally the case with the colonial script in its account of the colonized others. To illustrate the point, one of the senior white professors, for example, when recounting on his early training years in medicine reminisced thus: ‘I was stimulated from the beginning to work on research and I went to Rhodesia’. On the surface, this appears innocent but the symbolism of employing colonial nomenclature intimates a certain kind of colonial nostalgia – looking back at a once glorious past which had only been ‘messed up’ by the dawn of black rule in the aftermath of Africa’s independence. To refer to Zimbabwe as Rhodesia, even when one is taking stock of the past, communicates a deeper meaning at a connotative level. If at all this was doubted, it was to be confirmed later in the conversation with the same Professor Rosenthal who trumpeted the colonial meta narrative on Africa – with colonial Europe having saved Africa simply from the goodness of its heart, and for

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<sup>106</sup> In her study on the changing South African whiteness, Steyn (2001) suggested various forms of self presentation of South African whiteness and these were: (a) *still colonial after all these years* which represented a colonial fundamentalist, and denialist position; (b) *this shouldn’t happen to a white* that articulated racial envy and white sense of entitlement; (c) *don’t think white, it’s all right* representing whites retreating to their deep Western roots and expressing this, and in the process looking for ways to exert and maintain white influence in the new South Africa; (d) *whiter shade of white* which illuminate the liberal circles and their eagerness to colour-blindness and legitimating social and economic arrangements that maintain the hegemony of whiteness; (e) *under the African skies or white but not quite – whites wanting to disown their white identity and appropriating blackness*; and (f) *hybridisation: that’s the name of the game* – not denying whiteness but incorporating blackness into their whiteness.

which Africans have to be forever thankful. In this case, colonialism is not problematised. For example, he declares:

I don't care who says what, colonialism gave Africa infrastructure...going forward, we can build on this... If you want to make this an African university, please don't break it down – don't make it the lowest common denominator...[Professor Rosenthal].

The second part of the caption clearly demonstrates the substance of the colonial meta narrative on Africa that represents African identity and academic excellence as being diametrically opposed. That is, one cannot have 'African' and 'academic excellence' in the same sentence, hence to do so brings great anxiety on standard bearers such as Professor Rosenthal. Thus, if the change project is to make headways reassure Professor Rosenthal (and many others of his ilk) that the University will not, as a result, become 'the lowest common denominator' – with 'standards' and 'merit' no longer its preoccupations.

Closely related to the colonial denialist positionality is the belief in the master and servant narrative, often accompanied by a racial envy that current gains by blacks, however minimal, are tantamount to reverse discrimination, with whites suddenly becoming the new victims. The presence of highly educated blacks in the midst of whites, in institutions that historically excluded them, no doubt precipitates unwelcome ruptures to the established naturalised, commonsensical white social order. It is therefore argued that the harrowing condition of blackness at the University of Cape Town medical school has to be located and understood within this master and servant socio-historical relations, which have an enduring effect, given what Essed (1991) refers to as the everydayness of racism.

### ***8.2.3 Cape Town and its Enduring Racist Tag***

While previous research (Thaver, 2006 and Hall and Surtee, 2008; and London et al. 2009) found an inextricable link between the harrowing lived experiences of blacks and the geopolitics of the host city and province (and while there is no denying that some registrars interpreted their feelings of alienation as an extension of the more subliminal segregation in the city in which blacks are a notable minority) this connection was not as overt as perhaps it is evidenced in the literature referenced. With a closer glance at the literature, and with particular reference to the dialectic of person and place, London et al. (2009), for example, concluded in their study of registrars that black respondents were more likely to describe the



University of Cape Town as unwelcoming than whites, while registrars from outside the Western Cape, of which, doubtless, blacks would constitute a sizable majority, were even more likely to find the University unwelcoming.

In the London et al. Study (2009), one dominant theme stood out and that was the enduring white colonial mindset. Here, non South African registrars who were white and from Europe reported much higher levels of comfort with Cape Town and the University of Cape Town. Whites from outside Cape Town were intermediate, whilst blacks were worse off. Put differently, a German registrar was much more at ease with the UCT FHS and the City of Cape Town than a black registrar born and raised in South Africa, let alone Cape Town. In this study, whiteness was seen to be a global interlocking system of power that apportions privilege to its subjects across time, space, and context. While clearly not an observation with registrars in the third narrative, there were flashes of this in the second registrar narrative, while even more evident in the first narrative. One of the registrars in the first narrative was disheartened by the apparent disrespect from one of the consultants from a European country to which she retorted, 'but you are not even from here'. This was, however, not a direct rebuke to the consultant concerned but rather a conversation with herself post the incident.

#### ***8.2.4 Science (Medical Science) and Subjectivity***

The positivist body of thought elevates scientific rationality such that it is purported to be fixed, certain, positive, linear, and predictable (Jansen, 2009:180). Here, the laws of science are professed to eliminate uncertainty and rule out ideology in the quest by supposedly knowledge seekers to only arrive at the 'truth'. In this instance therefore, science poses to carry the pretence of neutrality. In a scientific and clinical medical practice environment, how then is it possible, for example, that black registrars' expertise can be this racialised? In other words, if science (not race, not ideology, not gender, not social conditions) is purported to be the sole reliable mechanism through which to get at the 'objective truth' (e.g. how and what knowledge one employs to make a diagnosis), how come is it that in this instance, the black lived experience at the UCT FHS cannot be adequately articulated without invoking the race (and racism) conundrum? CRT emerges out of the particular school of thought that sought to challenge the classical view on the application of law on the basis of pretences that law is an 'exact' and 'objective' science, and therefore neutral, a-contextual, apolitical and ideology-free, (Milovanovic, 2003). Extending this to the natural sciences in general and to occupations in the health sciences in particular, the classical view of science would almost

readily belittle claims by black registrars that their race (and racism) forms the perceptive schema through which their know-how, as scientists and health professionals, is assessed by mostly white colleagues. Moreover, there is an existing body of literature, some of which paints a grim picture on registrar programs globally, overall, marred by discontent and resentment at which however race seem to be almost absent in the articulation of the lived experience of the registrars concerned (Cook et al., 1996; Buddeberg-Fischer, 2006; Roth et al., 2006; Avan et al., 2006; Bonifati et al., 2003; Yaman and Ozen, 2002; Girad et al., 2006; Cohen and Patten, 2005; and Winter et al., 1990). The absence of this race-presence in most studies has to do with the social-historical contexts of the countries at which some of these studies were conducted.

With regards to the first assertion, depending on the specificities of each country; that is, the centrality of race does not necessarily hold in each country to the same extent that it may, perhaps, in the United States and in South Africa. Secondly, even if the centrality of race in the context of the United States is perhaps beyond question, given its long history of slavery and segregation, the predominance of the neoliberal ideals in social life at times belittles the invocation of race as central to social analysis, with the principle of equality being interpreted in the abstract sense – that is, stripped of its social, political, and historical context. This point has been expounded in much detail in Bonilla-Silva (2001) where he discusses the dominant frames of colour-blindness, with abstract liberalism the most dominant. Another point that may explain the near absence of race as part of the analyses in these studies is the idea of science itself as being supposedly ‘exact’, ‘positive’, and ‘ideology-free’. In this instance, the invocation of race to such analyses therefore is seen as emotive, unjustified, and unscientific, since race would necessarily drift into subjective experiences which are seen to be antithetical to scientific inquiries.

However, like Milovanovic (2003:116) when making his case for legal realism in disputing the purported neutrality of science and scientific judgements, of which law was also thought to be part of the family of the ‘exact’ sciences, this researcher argues that judgements, even those that ostensibly seem scientific, are in fact, dependent on feelings, hunches, intuition, flashes, instinct, conviction, and so on. Thus, while the lived experience of black registrars need not be sold as objective and the penultimate ‘truth’ – but rather their own subjective account of reality as they saw it, and as defined by them - similarly, the supposed negative appraisal by their white colleagues need to be understood in similar vein, i.e. as falling within

the realm of hunches, intuition, flashes, instinct, and therefore in no way representing the ‘objective truth’, thus stripping it of its supposed objectivity. Moreover, CRT implores us, in this respect, to bring the socio-historical factors to bear. In this instance, the negative appraisal of, for example, black competencies by whites, which purport to stem from ‘objective’ truths and observations, need to be understood within the broader socio-historical relations between whites (usually as the masters, experts, and trustees of black lives and livelihoods) and blacks (as those of the ‘inferior stock’, hence the social need by the adult, civilised whites to exercise trusteeship over them).

The white trusteeship over blacks in professional environments like in the academy takes various manifestations, as for example, patronisation, talking down and assuming a lack of confidence all of which are, of course, social conditions that make a compelling case for white trusteeship (Essed, 2010).<sup>107</sup> Related observations are made in Jasper (2007) on these very superficial social conditions that agitate for white trusteeship as a shadow is cast on black expertise to justify perpetual white steering over them. In Mabokela (2000) it is aptly demonstrated, for example, that so-called affirmation action appointees are permanently marked as such in the white imagination – inexperienced, inadequate, unqualified and forever needing white guidance to perform at the ‘required’ levels.

### **8.3 Countering White Oppression: Black Resistance Uncovered (Rooted in Narrative Two)**

Historically, whites have not had to relate to blacks in ways that current conditions now seemingly seek to dictate. Carol Turhune (2007) in her study of black middle class women in predominantly white neighbourhoods in Oregon tells of a similar account of blackness challenging the colonialist master and servant narrative and the employment of subtle racism by whites in coping with this ‘a-typical’ version of the black other. While it is customary that the observing white master would employ more subtle techniques in dealing with the new reality of contending with this rather ‘aberrational’ version of the black other, with responses such as, ‘you didn’t sound black’, ‘you are so articulate’, Turhune tells of more overt instances of racism - a phenomenon that is closely associated with the yester-years’ unsubtle and hostile master and servant social relations. In that regard, there were instances in our data where some of the black registrars expressed a view that they were being seen to be outside

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<sup>107</sup> <http://www.un.org/womenwatch/daw.csw/essed45.htm>. Accessed on 4 January 2010 [Online].

of the black mainstream, i.e., a version of a 'good black'. For example, it may be useful to restate one of the illustrative comments from a registrar in Narrative Two:

I think because my accent is different – people tend to relate to me differently – I do not have a distinctly Zulu English accent. So, people [white people] would think, oh, this is somebody we can relate to – he's not from here [South Africa] because I speak just about the same way they do. So, they would look at me as a so-called better black. Sometimes I get that perception... .

Most tellingly, however, as has been demonstrated in the data, 'good blacks' does not mean that these blacks in an instant became un-racialised and spared of all the pejorative social meanings attributable to their blackness. Instead, the idea of a 'good black' only bespoke of white tolerance of blacks and the conditions under which tolerance may be possible. That said, the 'good blacks' still remain highly racialised in the white imagination and it is the omnipresence of such racialisation that frames the phenomenon particularly self-evident in Narrative Two, i.e., black resistance to white oppression.

While there is an expectation of the academy being a nurturing place (which it has been shown to be for the white respondents, in fact, almost effortlessly so) in like manner, the academy should also be understood also as a place of great disenchantment (George, 2000). It is in the light of these struggles from within 'home' that black resistance to oppression in predominantly white milieus could be situated and understood. The expectation of 'home' at UCT FHS also needs to be situated within the context of the institution belonging to the public, as opposed to being a private concern. Black registrars ameliorate the effects of the disenchantment by looking to each other for comfort, for self-affirmation and validation. This was particularly strong with registrars in Narrative One. Registrars in Narrative Two have much the same approach except that they also look to other semblances of white support to lessen the disenchantment; and as has been demonstrated already in the data, there was some evidence of institutional support (for some registrars in Narrative Two) which was conspicuously absent for registrars in Narrative One. As an example (and much has been illustrated in the data chapter of this thesis). As if to restate the point, the following excerpt from one of the registrars in Narrative Two captures this quite succinctly – the comfort, security, and solace found in other black registrars is compared to the cloud of suspicion on the side of their white counterparts, who not only were they less supportive, but, also not worthy of their trust:

It is very easy to share your frustration mostly with your African colleague. You can share ideas about future plans and so on. You can't be sure about the others whether they are embracing you or not. So if you say I have this plan to be the next Chair of medicine – people kind of think who exactly are you. So you are very careful as to whom to speak to and whom to avoid... .

McKibbin (2007) in her essay on the possibilities of home unpacks home as it relates to the living experience of immigrants (as others) in the Canadian City of Toronto, from the novel by Dionne Brand, *What We All Long For*. In the novel, home is not portrayed as one finite stable institution at which one is either content or disenchanted. Rather, it plays a multiplicity of roles, at times contradictory. In the novel McKibbin refers to home (or the city) as fraught with contradictions and some very complex affinities. For instance, McKibbin (2007:503) observes that while home may seem, at first glance, to be an important and powerful space, that imposes itself on its occupants, let alone define them, it is on the same token, an uneasy and negotiable space. It is, therefore, this posture of negotiability that lends such a space a humanistic facade.

McKibbin's analogy of the politics of space in Toronto has resonance with the social space at UCT FHS as exemplified by the registrars' own experience of this space. Like the Toronto space, UCT FHS looked imposing, foreign and inhospitable. Yet, as demonstrated by registrars in Narrative Two, they still found ways to make this environment a little more palatable for themselves. These included, for example, nurturing good relationships with their HoDs (where such a possibility was feasible), befriending some of the white registrars and consultants, and being religious (invoking the presence of the supreme being in the midst of their trials and tribulations). That is, however imposing they found it to be, they still found ways to negotiate their way around it and they nurtured, in part, those very rare bonds with some of the white establishmentarians who took the trouble to lend them some support. In contrast, registrars in Narrative One found solace in social bonds from other black registrars and family in navigating the seemingly inhospitable terrain of UCT FHS. It is this possibility for negotiation – as evidenced from the data in Narrative Two - that textures the black resistance to white oppression in this predominantly white academy.

Acts of struggle and resistance are manifestations of the oppressed people's humanity, (Bell, 1995). In other words, it is through acts of struggle and resistance, of whatever form (individual or collective, active or passive, conscious or unconscious) that the oppressed can

assert their humanity. Black registrars of the second narrative who are saying, 'we are here to stay', while, doubtless, recognising that race and racism permeate all spheres of their lives at the medical school, explicate vividly the white oppression and black resistance matrix.

Bell's supposition that the struggle for social justice should not merely be reduced to struggle against white racism (even though the centrality of whiteness and racism are the core of CRT) for, as he averred, white racism may never be totally eradicated, should not be construed as capitulation to whiteness and therefore self-defeatist. In fact, in our context, this should have the opposite effect. That is, by deconstructing whiteness as not the sole object of black struggles for social justice merely assists in privileging blackness, in foregrounding experiences of the oppressed themselves in their own merit – independent of what whites do or do not do. This is not to say that what whites do or say is inconsequential. Rather, it is to say that it is the black experience that matters most. It is about giving blacks a voice that for centuries did not matter. It is about privileging blackness by conferring on it the much needed psychological advantage. It is a form of self-emancipation that is not contingent on whiteness but that which draws meaning and sustenance from blackness itself.

In coping with the enormity of the task at hand (of recognising and confronting racism), black registrars of the Second Narrative in particular take to heart the small and incremental steps that they make, in their individual effort, in trying to ameliorate the effects and ferocity of white racism. In this instance, there is no illusion of ever fully eradicating racism in their lifetime given the systemic, institutional, and ideological accoutrements that edify it. Thus, the race cognisant blacks ponder very little of a post-racial future in what Bell (1995) referred to as racial realism. Critical white studies scholar Eduardo Bonilla-Silva (2001) derides Derrick Bell on this formulation as he sees it as self-defeatist, and too disempowering to the oppressed people. He asks rhetorically as to what would be the point of struggle and resistance if the innate belief is that racism may never be overcome

It is this seemingly unattainable goal for equality, and by extension, the end of racism (and race) that may easily throw oppressed blacks into despair when pondering the grim realities and the enormity of the task at hand. In a bid to sharpen focus towards struggle and resistance while ameliorating the ferocity and debilitating potential of the despair, Bell (1995) suggests that casting off the burden of equality ideology will lift the sights, providing a bird's eye view of the situations that are distorted by race. From this broadened perspective of events and

problems, we can better appreciate and cope with racial subordination (Bell, 1995:308). Therefore, while 'being tired of race' (and racism) in South African society may be a covert acknowledgment of the indelibility of race to the nation's consciousness, the corresponding declaration that 'race defines me', that 'race has consequences for me', on the other hand becomes a necessary (although not sufficient condition) for protracted struggle and resistance of white oppression by blacks. This, to follow Bell's analogy, would represent, or intimate a kind of victory, never mind the ultimate outcomes (that is, whether or not in the end, race and racism will have been wiped out of the nation's social and political imagination).

Black registrars in the second narrative were resolute in staking a claim - unlike was the case with their counterparts in the First Narrative – notwithstanding the common felt experience of alienation, isolation, and indignation. The researcher takes the liberty of reminding the reader of the following quote forthrightly put from one of the registrars in the Second Narrative:

I don't easily get fazed. We might be viewed as arrogant of course. That is possible. So it is something that we learned over the years. We learned this in our formative years as young students at UCT... You deal with the issues promptly as they come. If I were to hear a patient saying I would love to be seen by that doctor instead of myself, I would say "with pleasure, you can go and see that doctor, but should he say that he does not have time, you might as well be seen by anybody else". And then they will come back with a tail between their legs to me and say can you assist, I would then say, "oh, with pleasure", and then you see the absolute guilt in them! You are not going to stupefy me or make me feel small. It is an art that I have learned over the years.

Staking a claim to UCT FHS is congruent to Bell's thesis of racial realism (the idea that eradicating white racism should not be the sole object of black struggles for social justice). Thus, we see, for example, black registrars in the Second Narrative (instead of fixing their gaze onto whiteness) turning more inward for self-relief and self-emancipation. This is not to say that these registrars saw whiteness in unproblematic terms. Rather, it is about stripping whiteness of its unearned tour de force as a determinant of black struggles. It is about saying that white racism need not be the sole determinant of the black experience, as though this experience can only find self-expression through white racism. Again, it is about deconstructing whiteness and stripping it of its unfair psychological advantage build over centuries of black oppression.

Meaningful social change dictates that, new entrants into the academy, like the black registrars, need to stay the course if there is to be a critical mass of blacks in the academy in general, and in the predominantly white universities, in particular. In the study of black experience in a predominantly white college, Solorzano (2000) interrogated the methods blacks employed to counter white oppression, and here he listed the creation of counter-spaces as a foremost pacifier of white oppression. In these social counter-spaces, it was found that blacks tended to provide support for each other against stereotype threats, in addition to striving to maintain a good academic standing with the aim that it would put them in good stead, while buffering the usually disparaging perceptions of themselves and their group by whites.

Like Solorzano's respondents, black registrars placed a high premium on peer support and racial solidarity and seemed to be facing a limitation in that such racial solidarity was not always readily manifest, owing to the organisation of the social space itself. For instance, except for a few disciplines, most black registrars hardly ever met given the fact that the teaching hospitals are sparsely scattered across the sprawling city and given the paucity of the black registrar population, it was often not practical to have a contingent of black registrars on the same rotation, at one particular hospital, at a given time. This ensured, therefore, that there was little social contact among them, and thus placed a further strain towards realisation of racial solidarity, even when they placed a higher premium on this as a potentially important avenue that engenders self-affirmation and a positive sense of self.

With the efficacy of counter-spaces in doubt owing to the practical limitations referred to above (for black registrars hardly ever met except for a few disciplines like public health, pathology, and radiology), they often found a positive sense of self through recall of affirming messages inculcated by family members early on during childhood and young adult life. Carol Turhune in her study of middle class blacks in a predominantly white suburb also came to similar conclusions, in that while she emphasised reliance on the black community and the black church as buffer zones for the embattled black middle class women, she also illuminated on messages of resilience passed onto them at an earlier age to both affirm them as well as forewarn them of the social reality of the spaces they would later inhabit in life and accompanying hostilities<sup>108</sup> (2008:555). This early positive messaging was not only confined

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<sup>108</sup> See also Williams (1990)



to the family, in the strictest sense. Rather, it did also include contributions from members of the broader community within which they grew up. In times of despair, alienation, and indignation, they tended to replay these positive messages in their social consciousness to contend with white racial oppression. In fact, analysis of Chapter 6 also demonstrated this. As Solorzano (2000) contended, counter-spaces do, nonetheless, serve as sites where deficit notions of blacks can be dispelled in an effort to advance a medical school climate that will affirm the black registrars' positive sense of self<sup>109</sup>.

In a social environment where the primacy of race and racism are unmistakable hallmarks, and where the black and white binary has omnipresence in texturing social relations, an impression may have been created of a total absence of white support. While in the case of the first registrar narrative, it may be somewhat accurate to refer to a total absence of institutional support, registrars in the Second Narrative were observed to have had some experience of institutional support, most notably from the HoDs and / or senior consultants. This researcher elects to refer to this kind of support as rather 'heretic' since it went against the dominant white institutional norms which unconsciously propagate non support of black registrars.

#### **8.4 The Black Professional Class and Colour-Blindness (Rooted in Narrative Three)**

There seems to be a qualitative difference in how the colour-blind frame is interpreted and employed by black registrars and white academic members of staff. While black registrars in the Third Narrative have aspirational inclinations to colour-blindness, whites on the other hand do claim to have embraced and internalised colour-blindness. That is, while it aspires to a post-racial future, the black professional class in Narrative Three does not, with any measure of conviction, assert its colour-blind disposition in the same way that whites appear to do. As would be explained later, whites unsuccessfully clamour to colour-blindness because they generally feel uncomfortable with the privilege paintbrush or even (as CRT would assert) they do so to camouflage unearned privileges by deflecting attention on how they negotiate on the basis of their whiteness, and how they continue to profit from it on a day to day basis. On the other hand, because race has consequences for members of oppressed groups (regardless of the post-racial future they might aspire to) it is quite clear that regardless, they will all see, do, and think in racial terms.

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<sup>109</sup> Refer also to Lucero (2000)

In his empirical work on blacks and conservatism, Hill (2007) tackled the question of whether conservatism can be in sync with the inescapable experience of blacks with race and racism. Explaining this phenomenon, he observed (as has been demonstrated by some registrars in Narrative Three) that ‘such blacks are equally adamant about their aristocratic status and their willingness to cooperate in the denigration of the less fortunate black masses...their criticism of the black underclass had placed them at the forefront of mass media and academic prestige’ (Hill, 2007:571). Some authors, e.g. Bonilla-Silva (2001) have weighed in and charged that because of the intensity of white oppression in general, and more so its modern subtler manifestations, a segment in the black population has tended to be reticent to identify and name racial oppression. As a result, they may have turned the guns onto themselves and see people of their stock as the problem while simultaneously rendering whites and white oppression invisible. While not quite in the order of symbolic violence (Bourdieu, 1991) or internalised oppression (Gramsci, 2003:12), black colour-blindness does represent a spectre of black disempowerment in an environment that is predominantly white and at which blacks are perpetual outsiders. On the contrary, the black registrars’ thinking within the white racial frame (of evading colour) (Feagin and Cobas, 2008) can only serve to affirm whiteness.

Black colour-blindness, however forceful in Narrative Three is a rarity as an expression of life experience in predominantly white environments. As illustrated in this research, for example, only four of the twenty registrars were that inclined. Bonilla-Silva (2001) in his research on thinking and making race in Detroit by both blacks and whites, the study found in general that blacks rejected the dominant themes and positions on race-related matters associated with colour-blindness (Bonilla-Silva, 2001:168). Unlike whites, blacks believe that discrimination is central and segregation is largely whites’ fault, and equality and fairness must be practical rather than abstract. In his research in Detroit, Bonilla-Silva further notes that even those blacks that endeavoured to clothe themselves with colour-blindness were less likely than whites to use the storylines of colour-blindness, a confirmation in this author’s view that not to see colour was not part of the lived experience of blacks in Detroit. In other words, race (and racism) permeates all facets of their lives in very fundamental ways. How, then, are we to understand the phenomenon of colour-blind blacks (as was the case with black registrars of Narrative Three). In pondering the question, Bonilla-Silva in his research asserts that ‘dominant ideologies affect, influence, and partly shape the consciousness of subordinated groups’, Bonilla-Silva and Embrick define racial ideology as ‘an interpretive

repertoire consisting of common frames,<sup>110</sup> style or racetalk<sup>111</sup> and [common] racial stories’<sup>112</sup> (2001:49). In a related treatise, Bonilla-Silva (2001:168) concludes, therefore, that ‘it was not surprising to find that a number of blacks were directly affected by the frames of colour-blindness’.

With registrars in the Third Narrative, it was clear that they made meaning of their experience (and the experiences of other blacks) in terms of the dominant white ideology that sees whiteness in unproblematic terms. Using white ‘interpretive repertoires’ that Bonilla-Silva (2001:168) refers to, we see blacks subconsciously employing these as their own. Here, whiteness is necessarily conflated with competence, unsurpassed know-how of one’s discipline. Therefore, there is a particular standard that blacks must meet if they are to be spared the white overcritical intrusive gaze. That is (as shown in the data) if black were only to work just as hard and have a mastery of their discipline as their white counterparts almost innately do, there will be no need for whites to lampoon them. For example, women as an oppressed group might also internalise patriarchal ‘interpretive repertoires’ and thus see other women’s apparent ‘incompetence’ as the sole reason for men’s domination over women. That is, so the argument goes, patriarchy will only dissipate to the extent that women themselves work just as hard as men do and have corresponding cognitive and technical abilities equalling or even surpassing those of men. These ‘interpretive repertoires’ advance a particular idea that blacks and women, as oppressed groups, are not oppressed on grounds of race and gender. That is, their oppressors see neither race nor gender. Instead, blacks and women are oppressed because they have not worked as hard to meet certain agreed ‘standards’ of competence and technical know-how.

The phenomenon of black colour-blindness is an area that is considerably under-researched in South Africa at the moment and this may partly have to do with the extent of the racial polarisation of the black and white relations in the post-apartheid era and the corresponding demands to promote the national project of reconciliation. Neoliberal perceptive schema (which is predominant in South Africa and is actively supported by the popular press, among other proponents) derides any consideration of racial typologies, for whatever reason – even

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<sup>110</sup> Bonilla-Silva and Embrick (2001) define common frames as topics central to the maintenance of a racial order.

<sup>111</sup> The idiosyncratic linguistic manners and rhetorical strategies individual employ to articulate racial viewpoints (ibid).

<sup>112</sup> These are narratives that appear over and over in the justifications used to maintain racial privilege.

if meant for the purpose of redress i.e. addressing existing inequalities historically premised on race.

While in the study by Bonilla-Silva (2001), blacks in the United States used the white racial frame of 'abstract liberalism' more than the other frames of colour-blindness, in articulating their racial views, black registrars in the third narrative employed 'minimisation of racism' and 'biologization of racism' in articulating their lived experience at the UCT FHS. Biologization of racism was most vivid in the various account that two black registrars made in seeming to label those blacks that reported to have had problems at the UCT FHS as lazy, not wanting to go the extra mile, not wanting to work hard, not willing to prove themselves and being too sensitive to criticism, and so on.

While it may be so that there is laxity among some blacks at the UCT FHS, the problem arises when their vices and shortcomings are attributable to their blackness as though there is something innate in blacks to not want to work hard, to lack agency. Minimisation of racism occurred at the same time as the biologization. With minimisation, colour-blind blacks in general tended to be dismissive of the suggestion that others have encountered racism, and thus, apportioned blame on those articulating this experience as being deficient and never, in general, reflecting on the supposed role of the white perpetrator. Whiteness, in this instance, was almost at best rendered neutral, and at worst, invisible, while blackness was the problematic, the aberration, something that which needed some 'fixing'.

To further understand the burgeoning phenomenon of colour-blindness and blacks in South Africa, it is important to understand the politics of national discourse and power, "for it is power rather than the facts about reality, which makes things true [or not true]", (Hall, 1992:293). Here, given the inequality in the power relations field between blacks and whites, it may well be that some blacks have internalised the white dominant ideology of colour-blindness<sup>113</sup> in post-apartheid South Africa, given the whites' material power to make reality fit their lives (Villenas and Deyhle, 1999). In other words, the apparent acquiescence of blacks to the white racial frame of colour-blindness is not inconceivable since whites (given that they have the ways and means in abundance to construct discourse) do have, in like

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<sup>113</sup> I have, in the literature chapter, critiqued colour-blindness in the post-apartheid era, given that its rigid leanings on abstract liberalist principles such as a equal opportunity will almost certainly keep intact existing social and economic inequalities in South Africa.

manner, the power to also construct social reality in that mode (of colour-blindness) to which some blacks seem to have simply acquiesced. This apparent complicity, however, need not presuppose that 'colour-blind' black registrars have precipitously legitimated the white dominant thinking of them as those of an inferior stock. To the contrary, while they may seem to render whiteness neutral or invisible, simultaneously, there is, overall, a strong sense of racial consciousness among this group of registrars. While purporting to articulate their lived experience in those terms outside of their race (as the data showed) there was a strong identity with the race (being black), let alone vivid evidence of race thinking, of race-talk. In other words, while the quest may, quite clearly, be towards colour-blindness, by explaining and ascribing apparent black failure in racial terms, these 'colour-blind', this group of registrars failed to live up to their conviction, that is, that of seeing no colour.

The sort of 'dominant repertoires' referred to have always found self-expression at the University of Cape Town by virtue of the particularities of its history - as a historically white English middle and upper class institution, to which blacks only began to gain unrestricted entry by the mid 1980s. It would, in fact, be imprudent (if not downright dishonest) to argue otherwise. The next example of so-called 'the great debate' at UCT made explicit these repertoires, and this relates in more explicit terms to the narrative on whites and the Third Narrative on black 'colour-blind' registrars. This researcher, however, wants to argue that, as it will be shown in the paragraphs to follow, this example of so-called 'great debate' best illustrates these white 'dominant repertoires'. Of course, with the First Narrative, black registrars seemed almost overawed by them while in the Second Narrative, there is resistance to them. In the Third Narrative, black registrars are not only overawed by these repertoires, they have subconsciously adopted them as their own. With the narrative on white senior academic members of staff, these repertoires were self evident from both the data and now with the newspaper clips on the 'great debate': the debate on the ethics and lawfulness of affirmative action at UCT as a means to redress current inequities on account of race.

Bringing the immediate social context to bear, the University of Cape Town in 2007 was engaged in a less than civil debate, sparked largely by a white Professor David Benatar's inaugural lecture. The lecture and the ensuing debate, of course, all came up after completion of interviews for this research. In his lecture, Benatar (2007) derided race based public policies such as affirmative action in the workplace and in student admissions, contending

that by using rigid Population Registration (Act 30 of 1950) old racial classifications,<sup>114</sup> blacks that have already reached the threshold of opulence continue to be unjustifiably empowered at the expense of poor blacks needing the propounded empowerment most, as well as poor whites, who according to Benatar, unjustly suffer collateral damages by virtue of their group membership, even if patently, they may be ‘disadvantaged’ much the same way as poor blacks. He then went further to question the efficacy of racial classification by contending that defenders of racial classification, for the ostensive purposes of redress are not able to put up for debate criteria employed that aid them to arrive at certain conclusions about the ‘scientific’ construction of racial categories. That is, since there can be no one transparent criteria or standard through which racial categories may be mechanically determinable, defenders of racial classification fail the rigorous test of reason as they erroneously assume that the end (racial redress) justifies the means (mechanically classifying people into arbitrary racial categories (Benatar, 2007).

Of course, elsewhere, there have been raging debates about the moral efficacy of affirmative action programs which critics, in the same manner as Benatar, deride it as blighting the very principles upon which a constitutional democracy is founded – the right to equality (or equal protection under the law). For example, leading the onslaught against race-based redress in the United States is the neo-conservative scholar Dinesh D’Souza in his magnum opus, *The End of Racism*, wherein he declared matter-of-factly, that ‘colour-blindness as a matter of public policy makes sense...government should be strictly race neutral, permitting our pigment to count neither for us nor against us’ (D’Souza, 1995: xxix). At the University of Cape Town the debate raged on for weeks with proponents (Berger, 2007:11) and very vocal critics (London, 20007:9; Haupt, 2007:11; Erasmus, 2007:9; Bloch, 2007:9; Brown, 2007:10; and Gobodo-Madikizela, 2007:8 and Goredema, 2007) all weighing in on Benatar’s lecture.

Predictably, all black participants through the UCT Black Caucus discussion list<sup>115</sup> and the popular press rationalised their push for race-based redress measures from a particular

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<sup>114</sup> The Act made provision for a four-tier racial typology consisting of Whites, Indians, Coloureds, and Blacks. In accordance with the Act, each person had to be classified into these four broad categories. In the event that there were disputes as to classification of certain persons for whatever reason, such duty then rested on the Office for Racial Classification which will make a final determination on the racial classification of the person(s) concerned.

<sup>115</sup> The Black Caucus has a discussion list through the UCT email system where members got together virtually and debated major contentious issues especially regarding transformation at UCT, racism, and the use of race as a proxy for disadvantage. The discussion list address was [bsa-l@lists.uct.ac.za](mailto:bsa-l@lists.uct.ac.za). Unfortunately, it has been inactive in the last year or so.

vantage point that sees race and racism as a ‘normal’ and endemic part of our everyday-living, and that much of the social inequities are socio-historical and thus context-specific. Therefore, to profess blindness implies that one turns a blind eye to the socio-historical factors and their resultant inequalities.

There seems to be a disjuncture between blackness and colour-blindness and this may be evidenced in the apparent silence of ‘colour-blind’ blacks who should have naturally weighed in and defended the neo-conservative establishment – a point, perhaps, indicating that blacks and colour-blindness are incompatible, given every black person’s experience with race and racism. A counter argument, may, of course, ensue, that perhaps silence in this instance need not presuppose acquiescence by ‘colour-blind’ blacks to the black mainstream thought. Maybe, so goes the argument, ‘colour-blind’ blacks kept quiet for fearing that they may be accused of betraying the race. But in an environment where blacks wield little power and influence, such accusation, will, in all likelihood, be inconsequential.

### **8.5 The Old and the New White Positionalities in Post-Apartheid South Africa (Rooted in the White Narrative)**

The life experience of whites as standard bearers and, therefore, members of the host society, illuminates the white self as unproblematised and un-racialised. That is, the white self seeks to perceive of itself as not knowing its ‘colour’ and attendant social ascriptions (that it represents, for example, neutrality, purity, merit, standards etc)<sup>116</sup>. Thus, for example, the data in Chapter 7 showed that the white experience at the UCT FHS seemed to have surfaced to the fore in three broad arenas; firstly, in the denial of race and racism, and by implication, denial of itself as a racialised monolith; secondly, its predisposition to debasing the black experience with race and racism (although this researcher can concede it was not all whites in the sample); and thirdly, the rare breed of whites that might concede their status as racialised selves while not seeking to sweep into insignificance the black experience with race and racism. In decoding this seemingly variegated white experience, further elaboration and illustrations from relevant literature, the data itself and some of our CRT theoretical tenets proved useful in the analysis, as might become clear in the next section.

#### ***8.5.1 The White Denial of the Racialised Self***

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<sup>116</sup> See, for example, Roediger (2003)

Almost all members of the white academic staff either feigned ignorance of their membership of the white group or denied it altogether. This surfaced in the interviews where the white respondents seemed to suggest the idea of race as insignificant and an irrational marker of privilege or disadvantage. Here, while it is known that black and white are socially constructed categories onto which particular social meanings are ascribed, these 'real' social categories are juxtaposed with nonsensical ones (colours) that carry no social meanings or social consequences. At the very heart of such a presupposition is the fantasy of being an 'un-racialised' subject – that is, as 'neutral', 'a-racial' subjects. bell hooks refers to this misrepresentation as a 'fantasy of whiteness' (hooks, 1995:36). In laying bare the centrality of race, she avers that 'in white supremacist society, white people can safely imagine that they are invisible to black people since the power they have historically...accorded them [the exclusive rights] to control the black gaze' (hooks, 1995:35).

The felt sense of security of belonging to the group, though often at the subconscious level and therefore rarely ever recognised, aids in the camouflaging of the white sense of self as one monolithic social group, intermittently appealing to its whiteness as they negotiate their way in the social stratum (Hall, 1992). For example, while whites may seem oblivious to their membership of the white group, it is clear from the chapter on the White narratives that at the level of negotiating entry into the university or the medical school they have had to depend on those very white social networks. In other cases, the data showed generally that they were simply encouraged and coached by establishmentarians on the minimum requirements needed to gain entry, and assisted along upon successful gain of entry. The assistance was better demonstrated by the fact that all white respondents, without exception, felt empowered, supported, and enabled in an environment where the vast majority of black registrars felt otherwise.

### ***8.5.2 The White Denial of the Black Experience with Race and Racism***

The white denial of race and racism is well documented in many a studies (Walker, 2005 and Lund, 2006; Steyn 2001; and Steyn and Foster, 2008). The mechanisms through which this denial finds expression is in established discourse (Solomon et al, 2005), perceived cultural differences seeming to be employed as euphemisms for race and racism (Durrheim and Dixon, 2000) and even whites ascribing onto whiteness a victim status (Kinney, 2003). In South Africa, victim status is ingeniously conjured through repeated claims of reverse discrimination against whites, and most often, with the immediate target of such vilification



being the current national policy regime on affirmative action and broad based black economic empowerment. As noted in previous chapters, the former seeks to quicken the pace of changing the demographics of South Africa's workforce so that it is truly reflective of the national demographics, while the latter is a scheme intended to increase black participation in the economy, mainly through equity, but also through skills transfer, affirmative procurement and so on.

While, in general, most white respondents in the study played ignorant to the black experience with racism (that is, seeming almost perplexed by it and with some seeking to relegate such experience into insignificance by punting individual effort as panacea to all black woes) there was also a corresponding assertion that in the new democratic dispensation, 'it pays to be black'. Here, as the argument goes: opportunities in the new dispensation only accrue to blacks at the expense of whites hence redress measures are seen by whites to be 'unfair' to them. Put differently, the transformation project is essentially seen as a zero-sum game, with the idea that the minimal gains by blacks necessarily come at the expense of whites.

While wanting to be seen to be supportive of the new policy regime (in that most whites in the sample and those in the selected newspaper clipping on affirmative action) did not appear to be vehemently opposed to the transformation and equity project *per se*, 'it pays to be black' however represents beneath-the-surface opposition that stands in contradistinction to the desired face the respondents wished to put on display. In silencing blacks, conservative whites and erstwhile liberals have sought to affix onto blacks, blemishing and damning markers such as 'McCarthyism', 'truth censors', 'orthodoxy', and to these one can add reverse 'discrimination / reverse apartheid' (Lawrence, 1993:14). Here; in one instant, blacks become oppressors and there is a corresponding pretence that the powerful have, all too sudden, become powerless – they have become innocent victims of black tyranny.

In their study of black African experience of living and working in the Western Cape, Hall and Surtee (2009) concluded that Cape Town, the host city of the UCT FHS was particularly hostile to blacks, and thus racist. The leader of the opposition Democratic Alliance, herself a former spin doctor for the University of Cape Town as its Director of Communications in the

mid 1990's, Helen Zille (2009)<sup>117</sup> retorted, in typical fashion, by characterising racism as an aberration, only manifest in a misguided few in the city as opposed to it being systemic and therefore an integral part of day to day life in the city. In a bid to expound on this denialist white talk, University of Cape Town chair of constitutional law Professor Pierre De Vos (2009)<sup>118</sup> argued to the contrary thus:

The Premier's response is unfortunate as it dismisses the sincerely expressed feelings of all those Africans who interviewed for the report. "You might feel discriminated against and marginalised because you are black", she seems to say, "but what you feel and experience is not real. Let the madam tell you what you should really feel and how you should really interpret the experiences of racism that you have encountered in our city"... Denying that anything is the matter is deeply insulting and dehumanising. It dismisses the real lived experience of a group of people just because they do not experience the world in the same way as their white counterparts

White academic staff impatience with race talk and apparent experiences of blacks that are presumed to be shaped by race is better explained also in Bonilla-Silva's account of the dominant white racial ideology of colour-blindness (details of which have been laid out in the literature section of this thesis (2001:142). CRT recognises that racism is a dominant feature of modern life rather than an oddity or an aberration. In decoding the inner workings of racism, it follows therefore that the experiences of those that see themselves at the receiving end of racial prejudice need to be taken as authoritative even when, as De Vos averred, it may not accord with the experience of the most dominant, in this case, white academic staff at the UCT FHS.

The new age of South Africa's constitutionalism requires: to grant all groups, particularly those disadvantaged and dehumanised by apartheid, a voice, so that that they too may reclaim their right to full human dignity – without fear of ever having one's experience invalidated by the most powerful in society. Granting the black voice a space is an important step towards transformation. It is an admirable step towards bridging the divide between black and white.

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<sup>117</sup> Helen Zille is the leader of the mainly white opposition party, the neoconservative Democratic Alliance (DA). She is also Premier of the Western Cape, the only province in the hands of the opposition. The rest of South Africa's provinces are under the ruling African National Congress (ANC) famously dubbed the party of liberation as it was the mainstream political formation during South Africa's struggle against apartheid.

<sup>118</sup> See <http://constitutionallyspeaking.co.za/cape-town-a-racist-city/>

In Steyn and Foster (2008), further light is shed on abstract liberalist discourse in their study of white talk in South Africa. In their analysis, they decode white talk by foregrounding its opportunistic overtures towards the new ideals in the post-apartheid era such as non-racialism, democracy, and equality. They coined this 'New South Africa Speak' (NSAS). However, NSAS tended to gravitate between this seemingly noble and benign positionality (while overtly pretentious) to an untenable extreme which they coined 'white ululation'. In this instance, white talk under 'white ululation' refers to, in general, overt conservative rightwing talk made a little more palatable by artful invocation of values, principles, and orientations of the new democratic order. This, they do in order to preserve a respectable face, yet at the very heart of these seemingly more benign and innocuous overtures is a particular drive towards the maintenance of the status quo which is already in their favour. This almost invariably therefore diminishes the black authoritative subject as an important contributor in the articulation of his / her own life experience, by usurping the expert role on black life and experience from him / her. This represents the contemptuous denial of the black voice – quite antithetical to CRT that proclaims a particular deliberative choice to have, as one's starting point, the conviction to ground social analysis from the point of view of the socially, economically, and politically marginalised groups, so as to inch closer to a fairer and just world (Duncan, 2002).

It is, however, not sufficient to pause at the point of denial without pondering on the genesis of the white denial itself. Again, from CRT, it may not be too extravagant an inference to make in presupposing that interest convergence / material determinism itself may account significantly in respect of the denial and silencing of the black marginal voice by whites. Interest convergence / material determinism advances a particular idea that while whites may occupy different positionalities in the social stratum; that is, that some may even appear to be supporting the cause for social justice, in the main however, whites as a collective, materially (gain even from a seemingly marginal position) and to the extent that their interests converge, personal convictions to eradicate and acknowledge racism will waver, (Delgado, 1995 and Taylor, 1998). From the data, this sort of convergence was clear in that while whites may occupy different levels of the academic hierarchy (some were full professors and some associate professors, and two of the associate professors were women) when it comes to acquiescing to the white 'dominant repertoires', almost all but one fell into line. In CRT terms, therefore, this was possible as their interests converged.

### ***8.5.3 Whites Conceding Race and Racism?***

While some respondents in the study did not seem to deny the experiences of blacks with racism and that, in general, their life chances and life experience were framed by their membership to the marginal black group, these whites sought to assuage this by steering the conversation to other often more discounted white marginalities. In that respect, they pointed to, for example, school types and family social class as aspects that may determine whether they are part of the centre or are relegated to the margins i.e. what was termed the ‘peripheral centre’ as described in the previous chapter with respect to white interviewees. This researcher wishes to contend that these out-of-the-radar marginalities, as oblique as they seem, serve a singular purpose as argued above and that is that they are thrown into social discourse as part of a move to minimise racism or the accounted experiences of blacks with racism (Bonilla-Silva, 2001).

### ***8.5.4 Is the Old Leftist Liberal the New Rightist in Post-Apartheid South Africa?***

The question is posed primarily to reflect on the myriad of perplexing white positionalities in the post-apartheid period, grounding this reflective exercise on the socio-political context within which the proponents of the anti-apartheid movement from within the ranks of academia operated, some from within the UCT FHS itself. In other words, the question is posed against the socio-historical posture of the University of Cape Town as a onetime hub of anti-apartheid activity, prepared to further and advance the ideals of anti-discrimination and social justice. Against this very noble background, therefore, a question is posed as to what could have changed in the intervening period of South Africa’s transition, since there seems to be, since the early part of this decade, a kind of a laissez faire approach to the broader transformation project.

As a starting point, there needs to be an acknowledgement that race as a marker of privilege and disadvantage continue to have a particular salience in our social fabric. CRT demands that social analysis be grounded from that particular vantage point. In seeking to understand the current white positionalities in the context of the past and current, this researcher wishes to contend that past anti-apartheid struggles at the University of Cape Town waged mainly by the sympathetic white liberal academic establishment did not go that far in narrowing the odious black and white social relations. Although noble and even commendable on the one hand, on the other, these struggles affirmed whiteness in that it was whites that were at the centre trying to do something for the blacks in the periphery – blacks that had no voice. This

signified the centrality of whiteness and the peripherality of blackness. But most importantly, it conferred a particular psychological advantage onto whiteness as it stood in a legitimate position of surety for blacks. It is within this socio-historical context of white positioning that the current race denials need to be understood, since whiteness still occupies the same social space that it occupied historically (irrespective of whether it positions itself from the platform of a protagonist for social justice or chooses the more neoconservative posture of minimising the black experience with racism, or even denying the authenticity of such an experience). Overall, this entanglement, therefore, speaks to the centrality of race and racism as integral part of day to day life at the University, as it is in the rest of contemporary South African society.

University of Cape Town

## CHAPTER NINE

### Conclusion

#### 9.1 All at Sea: Race is Everything and Everywhere

Prior experience and exposure to white environs during MB ChB training does not necessarily put black registrars in a privileged position in the 'master's house', as was expressed so clearly in the Second Narrative. Neither does an enviable petty bourgeois or middle-class background. For example, there was a mix of educational and class backgrounds (with no discernable pattern) among surviving navigators in the First Narrative, and that same observation obtained with registrars in the First Narrative. This meant that predisposition to a predominantly white milieu did not offer a reliable indicator as to how in the end blacks would experience those milieus. In the finals analysis, however, it has become an inescapable perception among most blacks that their lives at UCT FHS were, to a greater extent, circumscribed by their race. This, doubtless, pointed to the staying power of whiteness as an indelible marker of South Africa's social reality, hence, the many accounts of race and racism.

While almost always outsiders, blacks who were uninvited guests to white milieus were more likely to find this social space unwelcoming, alienating, and too distant to be taken as their own. Thus, this sense that one was not sought-after may limit the propensity to want to jealously guard the space, to fight for it, and preserve it. On the other hand, there also was evidence of *esprit de corps* by blacks who have been actively sought-after by white establishmentarians at UCT FHS, hence the apparent semblance of institutional support for them. This was mostly evident with some registrars in the Second Narrative. Invitations by whites to blacks put a sense of obligation on the part of whites to play good hosts whereas in situations where blacks stumble into white environs through efforts of their own there may be a little sense of such obligation on the part of the hosting whites. However, even when hosts played the game as per their 'obligations', as was shown in the account of some of the registrars in the second narrative (surviving navigators), this does not give blacks a heir apparent status into these white milieus. They still remain outsiders as far as whites are concerned. This again, could be explained in terms of 'human difference'. That is, that their race as a marker of their 'outsider-ness' has consequences for them, and in this instance, negative consequences.

With particular emphasis on the First Narrative, and to some extent, with reference to the second, it is apt to describe the very social fabric of the South African academy as being seemingly antithetical to the new ethos that a post-apartheid South Africa seeks to engender. As has been the case under apartheid, the academy still appears to be an abusive and intimidating space, hell bent on fostering fear among blacks. It is perceived to have remained an unsettling and badgering social space for most blacks, hence the lack of commitment to stay. Black registrars, especially in the First Narrative, would not stay to take up available appointments as academicians, even when they may desire to enter the academic profession. While some bemoaned the academic life style and the low salaries, given their racialised experiences at the UCT FHS, however, it is also quite clear that most found race and racism accounting for this pejorative take on the academic profession. This again, could be explained both in terms of the staying power of whiteness as well as race and racism as foremost descriptors of social reality. Under these circumstances, therefore, UCT FHS seemed far from achieving its much vaunted strategic objective of diversifying its academic staff profile, with its transformation agenda stymied as a result. The status quo looks set to remain in favour of the white minority – an indictment on South Africa's constitutional democracy that has equity among its founding tenets.

## **9.2 Surviving Navigators: the Case of Resistant Black Registrars**

While it was quite clear (as could have been already deduced above) that there was black disenchantment at UCT FHS, it is appropriate to restate here that the marker of difference between blacks in the First Narrative and those in the Second Narrative is the manner in which they sought to deal with their peripherality at the institution. Surviving navigators brought to the fore a narrative of black struggle or black resistance to white oppression. In other words, this cohort demonstrated that peripheral, marginalised, and often abused blacks in predominantly white milieus are not always passive recipients of white oppression. That is, it challenges the notion of only casting blacks in victim terms in the predominantly white milieus.

As has been highlighted already, it did appear that an 'invitation' by a white heir into the white academy seem to place an obligation on that individual person and those in their social circle to play good hosts, hence the difference in experience between those 'blacks at sea' and the 'plain sailing navigators'. As for the first narrative, this need not presuppose a security of tenure – that they too are heirs. Resistance to white oppression is also contingent upon the

ferocity of black political resolve. For instance, blacks in the second narrative see it as their mission to stay the course and become mentors and role models for future generations of black registrars and academics. Staying the course also seeks to prove that whiteness need not be conflated with standards, merit and quality. By holding out firmly in these white environments, blacks therefore seek to challenge the master narrative that almost always cast blackness in a deficit mode.

This researcher wishes to restate the importance of institutional support, which cannot be overemphasised enough in this study. The study empirically makes a poignant case that for blacks to thrive in predominantly white academes, they require unqualified institutional support, and in this instance, the role of the heads of departments (HoDs) who often double as medical consultants is crucial. For instance, it was quite apparent from the data that while black registrars in Narrative Two had almost similar experiences in terms of how they felt about UCT FHS, their feelings of dislocation were often mitigated by some glimpses of institutional support, especially from the HoD/consultant. That is, while institutional support for black registrars in the First Narrative ranged from indifferent to almost non-existent, institutional support for black registrars in the Second Narrative, in contrast, ranged from lukewarm to excellent, with the HoD playing a significant role in this regard.

### **9.3 The Case of Colour-Blind Blacks**

The author can conclude from Narrative Three that some blacks in post-apartheid South Africa rationalise the harrowing condition of blackness. To that effect, they have tended to internalise white mainstream ideological and political perspective as their own. Thus, 'colour-blind' blacks seem to cast whiteness as an unproblematised standard to which all blacks have to work towards while at the same time casting blackness in aberrational terms – as a state of being that is seriously needing some 'fixing'. For instance, the reader can recall statements by two of the registrars (Dr Mangope and Dr Baloyi) in the Third Narrative, who pathologised blackness. In their account they seem to say that 'for as long as black registrars work hard, adhere to high standards of patient care, are reliable and report for duty on time and are not lazy, they will be spared the wrath of whites'. That is, whites do what they do not so much because they resent blacks, rather, because they have committed themselves to the highest standards of patient care, and therefore, quite rightly, can demand no more and no less from their black colleagues. Thus, whiteness is hardly problematised in terms of its



unstated assumptions, privileged status, and white commonsense. It is rendered invisible with blackness presented as the problematic.

While it could, at the same time, be argued that colour-blind black registrars are, in fact, only concerned with their adherence to the highest professional standards of medicine and that this may, perhaps, be an adequate explanation of their stance that they see no colour except science, CRT does, however, exhort us to bring the appropriate socio-historical context to bear. If the concern is merely about adherence to the highest standards of healthcare, whose standards are these? In CRT terms, therefore, any talk of the 'highest standards of healthcare' must be problematised in terms of its socio-historicity and thus also of relations of power between whites (guarantors and gatekeepers of the health professions) and blacks (newcomers to the health professions taking up careers in the medical field). Given the conflation between whiteness and 'high professional standards', and with colour-blind black registrars as racialised subjects themselves, it is inconceivable to deny the black registrar its experience with race under the pretext of being only preoccupied with medical science in its purest sense. Medical science in general and healthcare provision in particular matters because not only are we talking of 'science' only but also politics. That is, provision of public healthcare is also a political matter.

'Colour-blindness', in its abstract liberalistic sense, presupposes that the self-proclaimed colour-blind body does not view its being, both in relation to itself and others, in racial terms, and curiously, this is where the black colour-blind brigade falters. While professing to see their lived experience not in terms of their race but as individuals, for instance, they simultaneously cast the negative lived experiences of other blacks in racial terms. Negative experience by blacks within the UCT FHS is seen as symptomatic of black underachievement. One factor, however, remains inescapable, it is quite clear that notwithstanding the fervent claims and strongly held conviction towards colour-blindness, blacks, as racialised subjects, cannot profess to see no colour.

#### **9.4 At Home and in Place: the White Standard Bearers' Lived Experience**

Whites as standard bearers, as insiders and heirs to the UCT FHS throne, exude a sense of ownership, of duty, and commitment to the institution. The prevailing air among whites of being in place and at home is self evident. However, what the study shows is that, notwithstanding the staying power of whiteness, the white experience is not totally uniform.

That is, although all whites feel at home and in place at UCT FHS, whites as insiders have a varying degree of rootedness with the medical school and the University.

Peripheral white women who saw their sense of place circumscribed by their gender decried their seemingly marginal status at the boys' club with its unfettered institutional influence. However, while gendering was singled out as limiting the white woman's sense of being in place, by eschewing the whiteness of their male counterparts and therefore preferring to only see their gendered persons presupposes a certain kind of neutrality to whiteness – a way to render whiteness invisible while its exercise of power continues subtly and virulently. For example, it is not only due to its maleness that the inner coterie at the UCT FHS is in the position of unchallenged majesty. Rather, it consolidated power partly by appealing to its whiteness. Otherwise, the few black males would also have found their designated place at the trough by virtue of their 'superior' gender which they share with white males. In this instance, therefore, marginal whites still remain white and do not exude the strong sense of displacement, exasperation and disenchantment as their black counterparts. In other words, marginal whites can never become the 'new black'.

While whites are, to a varying extent, contented with the UCT FHS, their social affiliations seem to be a variable, in some cases, determining the extent of their marginality as outsiders. Schools that certain whites went to confer social capital that may prove durable - and most effective for future assignments – especially in institutions of higher learning. For example, there was suspicion that the private Diocesan College-type schools,<sup>119</sup> with much stronger affiliation to the Anglican Church, have their alumni disproportionately populating the higher echelons of University management than those from ordinary public schools where most whites went. Nevertheless, the study concludes that white marginality in this sense does not, even in the slightest ways, offer a mirror image into black marginality. Whites, however marginal they may feel, remain insiders, relatively at home and in place and periodically being helped along. For example, it was shown in the case of Professor Maritz that while he felt an outsider, he had been actively headhunted by the then dean of the Faculty of Health Sciences to join the Faculty, counselling him on the importance of enrolling and completing his PhD so that his place in the academe is assured, as was the case with Associate Professors

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<sup>119</sup> These would be elite private schools, usually with very strong links to one of the mainstream churches in South Africa.

Paul-Gibson and McKinnon. As indicated earlier, their supposed marginal status does not confer onto them an outsider status – they remain part of the centre – the peripheral centre.

Overall, the study concludes that race continues to be a marker of either privilege or disadvantage in South Africa and that the almost sixteen years of democracy had hardly dented white power and privilege. Since blacks constitute an overwhelming majority, their gross under-representation in the academy and in key professional fields can only foster more civil strife and further strain black and white social relations. The strength and durability of South Africa's democracy, social cohesion, peace and stability, will be dependent on the extent to which blacks feel they have a role to play in shaping their country's future. Unfettered and seemingly unchallenged white monopoly in a social context in which the majority of the population is black, is simply unsustainable.

The research also demonstrated that being invited enables one to have a sense of comfort with the institutional environment. Those who have institutional support tended to have a sense of comfort and appraised the institution in a reasonably positive light. However, there were differentials in terms of the meanings accorded to these invitations. For instance, invitations to whites appeared to be confirmation of what has always been rightfully theirs. Hence, subsequent to the invitation, and upon taking up one's place, whites quickly developed a sense of propriety of the institution – they took ownership. For blacks, although they tended to enjoy more institutional support than did their 'uninvited' counterparts and thus appraised the institution in relatively positive terms, these invitations did very little to remove from them their status as guests. It was, therefore, inevitable that they still saw their experience being circumscribed by their race. The same applied to 'colour-blind' blacks, who, despite seeing no colour, displayed no sense of ownership of the institution. This was most exemplified by the absence of 'we' which, by comparison, white respondents invoked almost routinely during the interviews.

Lastly, while white power remains intact in the post-apartheid era (more so at institutions like UCT FHS where they have historically been a significant majority) it is appropriate to note that there are visible fissures in white power in this new era. Two phenomena from the data support this assertion. For example, the case of a white associate professor who found it difficult to get a permanent post despite the overwhelming support from a head of department is sufficiently significant to highlight. Also, the new phenomenon of the peripheral centre

attests to this white power contraction. Most significantly, however, is the earlier point this researcher made (and these fissures notwithstanding), white power has remained reasonably intact, and this was not only given expression by the harrowing condition of blackness at the hands of whiteness, but also by the overwhelming sense of propriety that whites in general exuded. This, therefore, supports CRT presuppositions, especially as to the prominence of race and racism in the new socio-political context.

While the salience of race and racism was apparent in this study, special mention needs to be made that the findings relate to a specific subset of the South African population, i.e. black and white professionals who are in elite careers in the academe and occupying the upper middleclass stratum. Accordingly, the study did not examine racial fissures involving non-professionals i.e. employees at the University of Cape Town's Faculty of Health Sciences who are among the lowest income earners at the institution. This, however, need not detract from the general CRT thought that race in a race-centred society like South Africa is an organising principle around which social relations are negotiated. Therefore, while the study was purely about elite health professionals at the UCT FHS, it is not inconceivable that even among those in the lower ranks of the social stratum, their lived experience of the institution will, to a greater extent, be circumscribed by race (and racism).

### **9.5 Recommendations: University of Cape Town's Faculty of Health Sciences**

As part of assisting the UCT FHS with its overarching transformation project, this researcher elected to suggest a number of recommendations which will be enumerated in the section below. The researcher wishes to make recommendations from the vantage point that articulates transformation as an aggregated product of incremental changes, all coming together in the remake of what should be an all-inclusive institution. Thus, the set of recommendations proposed are not premised on radical or precipitous change, but, are instead cognizant of attendant constraints, supported in the main, by our country's constitutional framework.

The recommendations are also proposed while recognising that the Faculty has its own peculiarities, which, to a considerable extent, dictate the nature, form, and pace of the needed change. For example, the Faculty of Health Sciences is the only faculty at the University that has a considerable proportion of its academic staff profile on joint appointments. Joint academic appointments are those shared between the Provincial Government of the Western

Cape Department of Health (PGWC-DoH) and the Faculty of Health Sciences. That is, while these members of staff are expected (as part of their contract with the University to teach and do research), they have a contractual obligation with the PGWC-DoH to work in designated academic hospitals as medical officers and medical specialists to fulfil the province's responsibility of delivering quality public healthcare. This, in itself, is a constraint for the Faculty since (given the contractual and legal obligations) it is not able to assume total jurisdiction over new appointments and conditions of service. All of these, notwithstanding, it is recommended, nonetheless, that:

**9.5.1** The Faculty embarks on a strategic recruitment drive for future black registrars and academic staff as part of ensuring a critical mass of black professional staff. As has been indicated by the data, there was a feeling by black registrars (especially in Narrative One and Narrative Two) that the fact that they are a minority makes their presence invisible and therefore, insignificant. With these black registrar appointments, special care needs to be taken in respect of those disciplines that have remained white male-dominated such as in the surgical fraternity.

**9.5.2** With special reference to 9.5.1 above, the Faculty needs to identify potential talent among the undergraduate MB ChBs. The Faculty needs to instil the love for lifelong learning and educate its black undergraduate class on the importance of growing specialist skills, as well as ensuring that blacks are a considerable proportion of the next generation of academics. The Faculty needs to organise regular information fairs, at least twice a semester, at strategic periods in the academic calendar. It must be compulsory that all heads of departments and/or divisional heads (whichever is more appropriate) are present and are key drivers of that conversation.

**9.5.3** With regards to securing the future academic pipeline, the same process contemplated in 9.5.2 for registrars should be relevant for identifying potential, except that here the undergraduate classes, in addition to the MB ChB class must be augmented by black students in allied disciplines. Particular attention needs to be paid to those disciplines that, to a considerable extent, have remained predominantly white, e.g. speech pathology and physiotherapy. Here, it would be important to acknowledge upfront, as part of the information fair, that the MB ChB academic route is disproportionately longer than it is the case with other disciplines – this is to ensure

that potential academics are psychologically prepared for the long haul, from the very beginning, impressing on them the vital prerequisite of specialist/registrar training beyond the MB ChB and the mandatory three years after the MB ChB.

**9.5.4** However imagined, configured or coined, the Faculty must do away with academic Employment Equity (EE) posts. Given the flurry of the neoliberal attack on affirmative action, the so-called EE posts cannot be articulated in any way other than in negative terms. From about the time black academic staff are appointed on the EE ticket, even beyond the EE contract post, they remain affirmative action appointees. Their status as second-class citizens, as people less deserving of their place, remains, almost intact. In response to this neoliberal backlash, the Faculty needs to give priority only to appointing black people and making these contract appointments to a maximum of three years, within which period these contract appointees are assisted to reach a certain minimum threshold that would guarantee them automatic appointments as fully tenured lecturers. To reduce the affirmative action sting from these appointments, a few white appointments can also be made if this is supported by a clear Faculty EE plan. The minimum threshold should, include good student reviews in respect of teaching, a book publication, three chapters in a book, three articles published in a peer-reviewed journal recognised for that purpose by the Faculty.

**9.5.5** In line with 9.5.4 above, the Faculty must do away with relying on foreign donors to fund contract academic positions. As far as possible, contract positions must be part of the Faculty's operating budget so that any failure to achieve the intended results poses dire consequences for the Faculty and the department concerned. With donor funding, the Faculty and departments rarely actively go out of their way to ensure that these posts yield the required outcomes as neither is affected in any real sense. Therefore, in the event that their operating budgets are directly affected by non-delivery, the leadership collective in the Faculty will take a keen interest in all their contract appointees, and ensure that they are afforded every opportunity to make a success of the contract academic positions they hold.

**9.5.6** As an addendum to 9.5.4, the Faculty needs to find more creative ways of incentivising Heads of Department (HoDs) and/or divisional heads, who attained a measure of success with their contract academic appointees, i.e. seeing them through

such that they were able to qualify for permanent appointments as academics. In like manner, the Faculty must also incentivise registrar mentoring. In other words, it has to pay to have black registrars in a department qualifying successfully with the relevant examining authority. In either case, the HoD concerned can be rewarded, for example, with an extra month of sabbatical entitlement, or be paid a bonus, and/or receive a salary augmentation or some monetary grant to boost their research funds. Incentives are important – it is not enough to simply pronounce mentoring and coaching as part of the HoDs’ job – and it is an open secret that such an antiquated approach has not worked in the past.

**9.5.7** As it is currently the case with the MB ChB class, the Faculty needs to seriously consider introducing rigid racial quotas as part of its drive to make the registrar class fully representative of the demographics of this country. Change in the registrar racial profile will come about as a result of a deliberate process – it cannot be something that is left to the whims of the registrar market, or even to chance.

**9.5.8** The Faculty must consider appointing a part-time ombudsperson who will receive, mediate, and adjudicate over complaints of racial harassment. The word harassment is advisedly used given the nature of data in Narrative One where registrars recorded experiences of open hostility. While it is recognised that racism in the modern period has assumed a more subtle tone, these flashes of open hostility should be worrisome for a university that is internationally acclaimed and prides itself of its past record of engagement in the anti-apartheid protest. The ombudsperson need not be one dedicated person, but rather, be from a roll - a list of 10 names, with those on the list availing themselves on a rotational basis so that closer ties are not developed with either the institution itself or with individual members of the Faculty – their independence is key, as is trust and fairness, so that they can dispense social justice equitably without fear, favour, or prejudice.

**9.5.9** Racism, especially in its most subtle and benign forms is most pervasive and as such this anti-racist effort at UCT FHS cannot be imposed from on high. It needs a fundamental change of hearts, minds, and attitudes. For this to happen, the Faculty must look at creating spaces and moments where its staff and registrars alike meet. In that regards, it can have fun-days on its calendar, during which staff and registrars are

challenged to copy ways, habits, behaviours, and thoughts of the ‘other’ – a reaching-out exercise of sorts. In assuming the positionality of the ‘other’, one is exposed to the world of the ‘other’ in such a way that it would make them critically ponder and reflect of that ‘othered’ positionality in the subsequent interactions with those ‘othered others’. In simple terms, it allows each person to move from the premise that says: ‘Were I to be them, what would my worldview be?’ Reaching out exercises afford staff and registrars an opportunity into each others’ journeys, perspectives, and orientations.

**9.5.10** The importance of symbolism as a signifier of who is celebrated, whose memory is inscribed and re-inscribed – basically, who matters, cannot be emphasised enough. There are few inscriptions on the Faculty landscape that tell a story of a university that is only located in South Africa. Registrars pointed out in the data that there is little symbolically on the UCT FHS landscape that resonates with them. In that respect, the Faculty should embark on a process of reappraising its symbols, artefacts, insignia and so on so that it represents the experience of a broad spectrum of its student, registrar, and academic populations. Here, the Faculty, can, for example, look at opportunities for naming and (re)naming buildings and public spaces over which it has jurisdiction with a particular bias in favour of those names which its minority black population will relate to. The first generation of black MB ChB graduates needs to be celebrated as part of the legacy building project for the Faculty. While there is plenty of photographs and portraits of past benefactors, students, pioneering academics, and philanthropists on its corridors, it is odd that there is nothing, for example, to keep the memory of that very first class of black MB ChB students. The researcher also thinks there are blacks that had made a mark, in their own right, in the medical field whose memory perhaps needs to be preserved as part of the Faculty’s history and this have been allowed to quietly pale into insignificance. This needs to be changed.

**9.5.11** As part of building a collective conscience, and ultimately a solid monolithic university community, however diverse it might seem to be, the Faculty needs to look at celebrating specific national commemorative days, especially that those that might seem to speak to the right to education and human rights, since, of course, access to quality healthcare is, itself, a human right issue. As part of its academic calendar, for



example, it can celebrate and have specific programmes around 16 June, Heritage Day, Women's Day, and Human Rights Day. Seeing that these are recognised public holidays, it should target a day preceding the public holiday (provided it does not fall on a weekend) and make sure that (while some formal academic activities may have to take place on that day) these commemorations do, nonetheless, take precedence.

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**Appendix I**  
**Draft interview schedule – qualitative**  
**Black registrars**

**1. Personal background:**

- 1.1 What is your schooling background (where did you go to school, how well integrated was your school)?
- 1.2 How would you describe your schooling experience? For example, was it fulfilling, enriching. If so, in what ways and if not, why not?
- 1.3 Have you always thought of a medical career as an option during your schooling?
- 1.4 What made you to choose medicine as a career?
- 1.5 Have you always wanted to be a doctor?
- 1.6 Is there a line of medical doctors in your family?
- 1.7 How did you get to know about a registrarship position in the department?
- 1.8 How were you introduced to the University of Cape Town – i.e. how did you get to know of UCT?
- 1.9 Are you a first generation medic and/or a specialist professional your family?

**2. Behaviours and perceptions:**

- 2.1 How do other registrars relate to you?
- 2.2 Do you think that sometimes other registrars and consultants relate to you differently because you are black?
- 2.3 What is the nature of interaction between yourself, other registrars and consultants?  
Formal – informal, warm – cold,
- 2.4 Does being a registrar in this department make you feel at home?
- 2.5 As a trainee expert/specialist, would you say that people always judge you more on your demonstrable expertise only?
- 2.6 Is the overall experience of working in this department pleasurable?
- 2.7 In moments of difficulties about work in this department, with whom would you normally share your frustrations with, and with whom would you rather not?
- 2.8 Would you say that there is a particular culture, or way of life specifically attributable to a medic?
- 2.9 What are some the properties of this culture, this way of being?
- 2.10 What do you find most alienating about these?

2.11. What aspects of the culture appeal to you most?

2.10. In terms of those aspects of the culture that alienate you, what do you think could be done to bridge the gap?

2.11 Have you ever felt you were victimised by others in this department and Faculty?

2.12 Tell me about your impressions on opportunities for advancement?

- Do you feel that you have opportunities and /or knowledge for career advancement?
- Any there any obstacles that you might want to share?

2.13 Tell me about your experience of teaching students and whether this has been good or bad?

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**Appendix II**  
**Draft interview schedule – qualitative**  
**White academic staff members**

**1. Personal background:**

- 1.1 What is your schooling background (where did you go to school, how well integrated was your school)?
- 1.2 How would you describe your schooling experience? For example, was it fulfilling, enriching. If so, in what ways and if not, why not?
- 1.3 Have you always thought of an academic career as an option during your schooling?
- 1.4 What made you choose medicine as a career?
- 1.5 Have you always wanted to be a doctor?
- 1.6 Is there a line of medical doctors in your family?
- 1.7 How did you get to know about a teaching career in the academy?
- 1.8 Are you a first generation academic in your family?
- 1.9 How were you introduced to the University of Cape Town – i.e. how did you get to know of UCT?
- 1.10 Are you a first generation academic in your family?
- 1.11 Tell me about how you came to be a Lecturer/Snr Lecturer/Associate Professor, etc. at UCT's Faculty of Health Sciences?
- 1.12 Did you go through the registrarship here at UCT before your appointment? If yes, could you give a brief account of your experiences as registrar?
- 1.13 How were you recruited into your initial position in the Faculty?
- 1.14 Please briefly sketch the path that you followed while at UCT to arrive at your current position.
- 1.15 What would you say has contributed most to your successes in your career as an academic?
- 1.16 How were you recruited into your initial position in the Faculty?

**2. Behaviours and perceptions:**

- 2.1 How does interaction occur in the Department and in the Faculty?
- 2.2 Who do you most interact with in the Department, and Faculty?
- 2.3 Under what conditions would this interaction occur?
- 2.4 Who do you least interact with in the Faculty and Department, and why?
- 2.5 With whom do you most share your experiences in the academy?

- Who do you turn to for assistance in resolving difficulties?
- Does it depend on what type of difficulty?)

2.6 UCT celebrated 175 years of history in recent times, how would you characterise its culture (its ways of doing, of seeing, of being) given this long history?

2.7 Do you think there is a particular tradition or culture that is expected of all in the department and Faculty to observe?

- How would you characterise this culture?

2.8 With regards to your teaching, research, and social circles, describe in each of these one particular incident where it all went wrong.

2.9. Are there any incidents that you found most pleasurable?

2.10 What aspects of the University's culture do you find less pleasurable and what would you propose be done?

2.11 Would you comment about asking support for junior staff?

2.12 Any other experiences that you might want to share about the culture in the Department and Faculty?

2.13 In terms of those aspects of the culture that are less appealing to you, what do you think should be done to make the environment a 'home'?

2.14 Given your experiences so far in your tenure as registrar, would an academic career excite you?

2.15. Have you ever previously thought about becoming an academic?

2.16 Among other career options that might be within your reach, would an academic career be your first choice?

2.17 If your answers in 2.8, 2.9, 2.20 & 2.11 are in the negative, with the benefit of hindsight, would still have taken up an appointment as registrar?

2.18 Tell me about your experience of teaching students and whether this has been good or bad?

2.19 Any other experiences that you might want to relate?